

LEASING INTEREST FORM

Building 4580 Suite C 10510 Superfortress Avenue Mather, CA 95655

Company Name:
Contact Name:
Phone Number:
E-mail Address:
Company Address:
Description of Proposed Business Activities, Desired Lease Term, Proposed Rental Rate, and Any Other Relevant Details:
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By completing and submitting this form, you are declaring that you are an agent of the company named above and are authorized to negotiate and execute agreements on behalf of the company.

Please submit a completed leasing interest form by November 1, 2023 at 2:00 P.M. Pacific Time for consideration. Late forms will not be accepted. If you have any questions or to submit your completed form, please contact Michael Winans at winans.nc.nih.gov.