INTERAGENCY REPORT CONTROL NO. **0031-GSA-AN**

STATUS REPORT FOR FEDERALLY FUNDED OR LEASED BUILDINGS - ACCOMMODATION OF PHYSICALLY HANDICAPPED

REPORTING PERIOD

TYPE OF FUNDING

NAME OF DEPARTMENT/AGENCY/GOVERNMENT ENTITY

NAME OF AGENCY CONTACT

TELEPHONE NO.

NAME OF BUILDING AND GOVERNMENT BUILDING NO. a	STREET ADDRESS, CITY AND STATE b	COMPLY c	EXCEP. UTIL. d	WAIV. GRNT'D e	BUILDING USAGE CODE f	AGENCY HOUSED g	SQUARE FOOTAGE h	OWNED/GRANT				LEASED FACILITIES		
								NEW i	ADD./ALT. j	BID INVITA-TION DATE k	DATE OCCU-PIED l	ANNUAL RENT m	ALTERA-TION COSTS n	LEASE TERM o
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CERTIFICATION: I certify that the above buildings are subject to and comply with Section 2 of Public Law 90-480, as amended.	TYPE NAME AND TITLE OF CERTIFYING OFFICIAL	SIGNATURE OF CERTIFYING OFFICIAL	DATE

INSTRUCTIONS

Purpose of this form is to provide an inventory of buildings subject to Sections 2, 3, 4, and 4a of Public Law 90-480.

Reporting Period:	The annual reporting period for purposes of this requirement, end on the last day of August. (For example, September 1, to August 31,). Reports will be due on the fifteenth calendar day of the following month.
Type of funding:	Indicate whether Government-owned, Government-leased, funded by grant; funded by loan. Use separate pages to group projects according to type of funding.
Department/Agency/Entity:	Self-explanatory.
Name and Telephone No. of Agency Contact:	Indicate person most familiar with program.
Name of Building:	Use official Building Title and avoid obscure abbreviations. Enter in column a.
Street address, City and State:	Enter actual address of the building in column b. Use official state abbreviation.
Comply:	Does this facility comply with Sections 2, 3, 4, or 4a of Public Law 90-480, as amended? Enter an "X" in column c if the facility is in compliance.
Exception Utilized:	If an exception has been utilized as listed under FPMR, Subpart 101-19.604, enter the applicable paragraph letter; i.e., (a), (b), (c), (d), or (e) in column d. Agencies not subject to FPMR: leave the column blank.
Waiver granted:	If the facility has been granted a waiver under Section 6 of Public Law 90-480, enter an "X" in column e.
Building Usage Code:	Refer to FPMR (41 CFR) Subpart 101-3.4901, (k) (4), Usage Code and Classification for usage code only. Enter appropriate usage code number in column f.
Agency Housed:	As space permits, enter Federal Agency Code Number for the principle agencies housed in the facility in column g.
Square Footage:	Enter the gross square footage (to the nearest thousand sq. ft.) of the facility if owned or assisted with Federal funds, or the net usable square footage of leased areas, in column h.

Owned/Grant

New:	If the facility is newly constructed, enter an "x" in column i.
Addition/Alteration:	If the construction is an addition or alteration to an existing facility, enter an "X" in column j.
Bid Invitation:	Enter the date that bids were formally invited on the facility in column k.
Date Occupied:	Enter the date of project completion or date of occupancy, whichever occurs first, in column i.

Leased Facilities

Annual Rent:	Enter annual contract rent to nearest thousand dollars in column m.
Alteration Costs:	Enter any funds (to the nearest thousand dollars) expended for providing handicapped facilities under the lease including any portion of the rent which can be directly attributed to the cost of providing the handicapped facilities in column n.
Lease Terms:	Date of lease commencement and expiration dates. If you are not able to furnish actual dates place "e" in column o to signify estimated dates.
Certification and Signature:	The signature of the head of the agency or his designee certifies that all projects subject to the Act are prepared and that the projects are in compliance with the Act.