

PROPERTY DEVELOPMENT AND MANAGEMENT OFFICE

PROPERTY LEASE REQUEST FORM - CORPORATION

INSTRUCTIONS

1. This Property Lease Request form, model ODAP-V-S-004 (the "Request"), shall be used by any individual interested in leasing a property from the Puerto Rico Land Administration.
2. **This Request form must be filled in all its parts** and submitted with all the required documents. **The Puerto Rico Land Administration (PRLA) will not evaluate incomplete documents.** The Request shall be delivered to the Puerto Rico Land Administration's Property Development and Management Office, located on the second floor of #171 Carlos Chardón Avenue, San Juan, Puerto Rico; or by mail to the following address: PO Box 363767, San Juan, Puerto Rico 00936-3767.
3. **This Request form must be accompanied by a non-refundable payment for an administrative fee in the amount of fifty dollars (\$50.00).**
4. Once submitted, this Request form is valid for one (1) year from the date of delivery at the PRLA, after which a new Request must be submitted in the case there is still an interest in the requested property transaction.
5. For additional information on the Request submittal and evaluation process you may contact the Property Development and Management Office at (787)753-9300.

DOCUMENTS THAT SHALL BE ATTACHED TO THE REQUEST:

- | | |
|----------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <input checked="" type="checkbox"/> PRLA administrative fee (\$50.00 payment). | <input checked="" type="checkbox"/> Income Tax Returns Filing Certificate (PR Treasury Department). |
| <input checked="" type="checkbox"/> Photo ID of the corporation's authorized representative. | <input checked="" type="checkbox"/> Negative Debt Certificate (PR Treasury Department). |
| <input checked="" type="checkbox"/> Executive Summary for Proposal, describing the proposal or the project that justifies the Request. | <input type="checkbox"/> Copy of Income Tax Return for previous year. |
| <input checked="" type="checkbox"/> Certificate of Organization (PR State Department). | <input checked="" type="checkbox"/> Employers Compliance Certificate, from the Puerto Rico Child Support Administration (ASUME by its Spanish acronym). |
| <input checked="" type="checkbox"/> Certificate of Existence (PR State Department). | <input checked="" type="checkbox"/> Negative Debt Certificate for all Concepts, from the Municipal Income Collection Center (CRIM by its Spanish acronym). |
| <input checked="" type="checkbox"/> Certificate of Good Standing (PR State Department). | <input type="checkbox"/> Certificate of authorization to do business in Puerto Rico, compatible with the project timeframe. (Applicable only if applicant is a of foreign corporation) |
| <input checked="" type="checkbox"/> Employer Identification Number (EIN). | <input type="checkbox"/> Document of Exemption from the PR Office of Government Ethics (Applicable to government officials or employees). |
| <input checked="" type="checkbox"/> Corporate resolution (stamped with the entity's official seal), authorizing the representative to act on its behalf. | <input type="checkbox"/> Credit reference (3) |
| <input type="checkbox"/> Audited financial statements for, at least, the previous three (3) years (only for development projects). | |
| <input checked="" type="checkbox"/> Affidavit Anticorruption Code for New Puerto Rico | |

WHEN REQUEST RESPONDS TO A DEVELOPMENT PROJECT, INCLUDE ANY OF THE FOLLOWING:

- | | |
|--------------------------------------------------------------|---------------------------------------------------------------|
| <input type="checkbox"/> Proposed project sketches. | <input type="checkbox"/> Proposed project Conceptual plans. |
| <input type="checkbox"/> Proposed project conceptual images. | <input type="checkbox"/> Proposed project schematic drawings. |





ADMINISTRACIÓN DE

TERRENOS

GOBIERNO DE PUERTO RICO

APPLICATION NO.

PROPERTY DEVELOPMENT AND MANAGEMENT OFFICE

PROPERTY LEASE REQUEST FORM - CORPORATION

Instructions: Fill all the blank spaces, using readable handwriting on black or blue ink. When information is not applicable, write N/A. This Request form must be completed in all its parts in order to be managed by the Puerto Rico Land Administration. The Puerto Rico Land Administration reserves its right to deny or reject the request due to missing information. Attach a site plan or map of the subject property depicting its location and the portion of the property to which the Request applies to. The Request will be valid for a year, after which a new Request must be submitted.

PROPONENT: [] INDIVIDUAL [] CORPORATION [X]

SECTION A: PROPERTY INFORMATION

PROPERTY NAME: [] TERM REQUESTED: []
MUNICIPALITY: [] WARD: [] REQUESTED AREA: []
PROPERTY ID NO. [] SURVEY PLAN NO: []

Socio-economic data of the proposed project:

NEW JOBS TO BE CREATED: [] JOBS TO BE MAINTAINED: [] DIRECT JOBS: [] INDIRECTS JOBS: []
USE: [] AGRICULTURAL [] INSTITUTIONAL [] INDUSTRIAL [] COMMERCIAL [] OFFICE [] RESIDENTIAL []

TYPE OF FUNDING OR FINANCING: [] [] [] [] [] [] [] [] [] []

EXPLAIN: []

DESCRIBE IMPROVEMENTS TO THE PROPERTY: [] YES [] NO []

EXPLAIN: []

SECTION B : INFORMATION ABOUT THE CORPORATION OR ENTITIY

COMPANY NAME: []

BUSINESS STRUCTURE: [] TYPE OF BUSINESS OR SERVICES: []

EMPLOYER IDENTIFICATION NUMBER (EIN): [] NUMBER OF EMPLOYEES: []

PHONE: [] FAX: [] EMAIL: []

MAILING ADDRESS [] PHYSICAL ADDRESS []

[] []

ODAP-A-S-004 Rev. April 2022



AUTHORIZED PERSON TO ACT ON BEHALF OF THE ENTITY FOR THIS REQUEST'S PURPOSES:

NAME:

PHONE:

FAX:

EMAIL:

MAILING ADDRESS

PHYSICAL ADDRESS

PRESIDENT or MANAGING PARTNER OF THE ENTITY:

NAME:

PHONE:

FAX:

EMAIL:

MAILING ADDRESS

PHYSICAL ADDRESS

RESIDENT AGENT OF THE ENTITY:

NAME:

PHONE:

FAX:

PHONE:

MAILING ADDRESS

PHYSICAL ADDRESS

NAME OF MAIN PARTNERS OR MEMBERS OF THE BOARD OF DIRECTORS

1.

2.

3.

4.

5.

6.

7.

8.

9.

10.

APPLICANT'S CERTIFICATION

