# **Annual Income and Expense Report Summary Page**

Owner	Property Name							
Mailing Address	Property Address	Property Address						
City/State/Zip	Parcel Id/code#.							
1. Primary use of Property: circle appropriate	item.							
$\underline{\mathbf{A}}$ . Apartment $\underline{\mathbf{B}}$ . Office $\underline{\mathbf{C}}$ . Retail $\underline{\mathbf{D}}$ . Industri	al $\underline{\mathbf{E}}$ . Mixed Use $\underline{\mathbf{F}}$ . Shopping Center $\underline{\mathbf{G}}$ . Other $\underline{\underline{\mathbf{G}}}$							
2. Gross Building Area (including owner occupies 3. Net Leasable Area 4. Owner Occupied Area 5. Number of Units 6. Number of parking spaces 7. Building Age (year built) 8. Year(s) Remodeled	s							
18 <b>Total Potential Income</b> (sum lines 9 to 17) 19. Loss due to Vacancy & Credit								
20. <b>Effective Annual Income</b> (line 18 minus lin	ne 19)							
Expenses								
22. Electricity 23. Other Utilities 24. Payroll (except mgmt., repair & décor) 25. Supplies (janitorial, etc.) 26. Management 27. Insurance 28. Common Area Maintenance 29. Maintenance & General Repair 30. Leasing Fees/Commissions/Advertising.	32. Elevator Maintenance 33. Tenant Imprvmt. (Specify) 34. Other (Specify) 35. Other (Specify) 36. Other (Specify) 37. Security 38. Total Expenses (lines 21 to 37) 39. Net Operating Income 40. Capital Expenditures 41. Real Estate Taxes 42. Mortgage Payment (P&I)	\$						
	at that the foregoing information, according to the complete statement of all income and expense the Connecticut General Statutes).							
Signature	Name (Print)	Date						
Title	Phone/Fax /							

### Annual Income and Expense Report

#### **Filing Instructions:**

The Assessor Office is required by law to revalue all property located in this municipality. In order to assess your real property fairly and equitably information regarding the property income and expenses is required. Connecticut General Statute 12-63c, as amended, requires all owners of rental real property to annually file this report with their local Assessor's Office. All information filed and furnished with this report will remain confidential and is <u>not</u> open to public inspection. Any information related to the actual rental and rental related income and operating expenses shall <u>not</u> be a public record and is <u>not</u> subject to the provisions of Section 1-19 (Freedom of Information) of the Connecticut General Statutes.

Please complete and return the completed forms to the Assessor's Office on or before June 1<sup>st</sup>. In accordance with section 12-63c(d), of the Connecticut General Statutes, as amended, any owner of rental property who fails to file this form or files an incomplete or false form with the intent to defraud, shall be subject to a penalty assessment equal to a **Ten Percent** (10%) increase in the assessed value of such property.

### **General Instructions:**

Complete this form for <u>all</u> rented or leased commercial, retail, industrial, or combination property. **Identify the subject property and its street address** and remember to provide a <u>separate</u> form for each individual property.

Provide, at the top of the form, the **year indicated** for this annual information.

Type/ Use of Leased Space: Indicate the use the leased space is being utilized (i.e., office, retail, warehouse, etc.)

Esc/ Cam/ Overage: Indicate applicable.

Escalation; Amount, in dollars, of adjustment to base rent either preset or tied to inflation index.

**Cam**; Income received form common area charges to tenant for common area maintenance, or other income received from common area property.

income received from common area property.

**Overage**; Additional fee or rental income. Usually based upon a percent of sales or income.

Option Provisions / Base Rent Increases: Indicate the percentage or increment and time applicable period(s).

Property Expenses & Utilities paid by tenant: Indicate any apportionments between owners and tenants

**Interior Finish**: Indicate ownership, tenant vs. owner, and associated cost.

**Parking:** Indicate the number of parking spaces, annual rent for each tenant, include spaces or area(s) leased or rented to parking concession as a tenant.

<u>Spaces rented twice</u>: Identify to the individual tenant as applicable those spaces rented or leased having separate daylight and/or evening hour terms.

### Complete Verification of Purchase price information.

**Who should File-** All individuals and businesses receiving this form should complete and return the form to the Assessor's Office. If you believe that you are not required to fill out this form, please call the listed number to discuss your special situation. If a property is partially rented and partially owner-occupied this report <u>must</u> be filed.

If your property is 100% owner-occupied, or 100% leased to a related corporation, business, family member or other related entity, please indicate on filed return.

<u>How to file</u>- Each summary page should reflect information for a <u>single</u> property for the year. If you own more than one rental property a separate report/form must be filed for each property. An income and expense report summary page and the appropriate income schedule must be completed for each rental property. A computer printout is acceptable, in lieu of standard forms, provided all required information is included. All property Owner(s)/ Agent(s) must sign & return these forms to the Assessor's Office on or before June 1<sup>st</sup> to avoid the Ten Percent (10%) penalty.

# Verification of Purchase Price (please report only sale information not previously reported in prior filings)

Total Purchase Price \$	Cash Down	Payment \$	Da	ate of Purchase
Date of Last Appraisal	Appraisal Firm			_Appraised Value \$
1 <sup>st</sup> Mortgage .\$	Interest Rate% Interest Rate%	Payment Schedule Term Payment Schedule Term	years	Mortgage type; Fix Variable Mortgage type; Fix Variable Mortgage type; Fix Variable Mortgage type; Fix Variable
Did the purchase price include payment for	r: Furniture & Equipment \$	(Declare Value) Goodwill S	(Declare Value)	Other (specify) \$(Declare Value)
Was the sale between related parties?	Yes / No (circle one)	Approximate Vacancy a	at date of purchase	%
Has this property been listed for sale since	your purchase? Yes /No (	circle one)		
If yes; Asking price \$	Listing period	Agent/Broke	er/Agency:	
Remarks- please explain any special circum	nstances or considerations	s made during your purcha	se:	
Property Address				Year through
Building Features Included in Rent No.	umber of Units Roo	om Count Unit Size	Monthly Rent	Lease Term

Building Features Included in Rent Number of Units		of Units	Room	Count	Unit Size	Monthly Rent		Lease Term	
(Please check all that apply)	Total	Rented	Rooms	Baths	Sq. Ft.	Per Unit	Total	typical	
Efficiency									
1 Bedroom									
2 Bedroom									
3 Bedroom									
4 Bedroom									
Other Rentable Units									
Owner/Manager/Janitor Occupied									
Subtotal									
Garage/ Parking									
Other Income (specify)									
Totals									

Property Name	Leasee Rent Schedule				
Address	Yearthrough				

these schedules to include all rental activities other than apartment rentals, for apartment rentals see Schedule A.

Tenant Name Location	Location	Lease	e Term		Ann	ual Rent	<u> </u>	Park	king	Optn Provisions/	/ Interior Finis	
	Beg./End	Sq.Ft.	Base	Esc./Cam Overage	Total	Total S.F.	#Spaces	Annual Rent	Base rent increases	Ownr/Ten	Cost	
					T		Э.г.		nent			
-		1										
				1								1
				ļ				ļ				
		1		1								1
Totals		<b>.</b>										