

Annual Expenses for All Property Uses – PARCEL ID AND LOCATION FIELDS MUST BE COMPLETED

Parcel ID:		Location:		Expenses for Calendar Year: 20__ (Last Year)
USE CODE:	Owner Amount	Tenant Amount (under MG, N, NN and NNN Leases)	Expense Descriptions-All Expenses <u>Must</u> Relate to the Real Estate and <u>NOT</u> the Business	
<u>Management & Administrative</u>			These expenses are <u>not</u> typically valid for Owner-Occupied properties	
Management	\$	\$	Costs for property management overall, owner or professional service	
Administrative/Salaries	\$	\$	Costs for staffing of secretary and/or leasing agent to service the property	
Marketing/Promotion/Commissions	\$	\$	Costs for advertising, fliers & commissions to gain tenants	
Legal Services	\$	\$	Costs for property-related legal advice, lease writing, etc.	
<u>Maintenance & Cleaning</u>			Costs to keep the property presentable, accessible & clean	
Contracted Grounds-keeping	\$	\$	Service for mowing, plant trimming, fertilizing, mulching, raking, etc.	
Contracted Snow Removal	\$	\$	Service for clearing driveways, sidewalks & parking after snowfalls	
Contracted Trash Removal	\$	\$	Service for trash pick-up	
Contracted Janitorial/Specialty	\$	\$	Service for cleaning windows, exterminator, common area/parking sweeping	
Property Supplies	\$	\$	Cleaning supplies, hand tools, things used to support the property	
<u>Repairs & Refurbishment</u>			Expenses incurred yearly for basic property maintenance-not major repairs	
Exterior/Interior	\$	\$	Typical painting, trim, glass & screen repair, lock & light repair	
Electrical, Plumbing, Mechanical	\$	\$	Fixture replacements, plumbing leaks, air cond. repair, heater repair	
Common Area	\$	\$	Sidewalk repair, signage, exterior lighting, etc.	
<u>Utilities</u>			To heat/cool area, lights, etc. Don't include usage for manufacturing, etc.	
Electricity	\$	\$	If tenant pays, leave amount blank unless annual expense is known	
Gas/Oil	\$	\$	If tenant pays, leave amount blank unless annual expense is known	
Water/Sewer	\$	\$	If tenant pays, leave amount blank unless annual expense is known	
<u>Other Expenses</u>			Most or all of Condo Expenses go here, under Condo Association Fee	
Property Insur. (1 yr, real estate only)	\$	\$	Cost for annual property insurance premium only (no cars, boats, etc.)	
Reserves for Replacements	\$	\$	Budgeted annually for future major costs like new roof, HVAC replacement	
<i>Condo Association Fees (Not BID fee)</i>	\$	\$	<i>For retail, office & industrial condos-covers common expenses & upkeep</i>	
Real Estate Taxes (Net leases only)	N/A*	\$	Taxes paid by tenant in whole or under escalation terms in lease	
Capital Costs (allocated to last yr only)	\$	\$	Reserves spent on capital repair costs (roof, HVAC, etc.) expensed over time	
Total	\$	\$	* Note: Debt service (mortgage), real estate taxes and depreciation are NOT allowable expenses since they vary greatly between properties & investors.	
Comments:				

IMPORTANT: PROPERTY LOCATION AND PARCEL ID FIELDS MUST BE COMPLETED

COMMERCIAL & INDUSTRIAL PROPERTY LEASE / RENTAL TERMS	Property Location:	Income for Calendar Year: 20__ (Last Year)
	Parcel ID:	

Note: You may attach year-end accounting statements as long as they include **ALL** of the same information requested below. **IRS profit & loss statements are NOT acceptable** and all income/expenses reported should be under the accrual method of accounting covering last year only.

Tenant Name (*If 100% owner-occupied, please enter business name(s) & complete next 3 columns)	Use of Space: (Retail, Office, Mfg, etc.)	Floor Level: (1 st , 2 nd , 3 rd , Bsmt, all space)	Net Leasable Unit Area (Sq. Ft.)	Lease Type: Gross (G), Modifier Gross (MG), Net (N), Double Net (NN) Or Triple Net (NNN)	Lease Start Date (Mo/Day/Yr)	Lease End Date (Mo/Day/Yr)	Renewal Options (Y/N)	Monthly Rent	Total Annual Rent (12 mo.)
								\$	\$
								\$	\$
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								\$	\$

OTHER INCOME: Overages, Chargebacks, Cell Towers, Billboards, Vending, Parking, Other

Source	Monthly Amount	Annual Collected	Comments:
	\$	\$	
	\$	\$	

I certify under the pains and penalties of perjury that the information supplied herewith is true and correct (all lines below MUST be completed) and that this information has been submitted to the Assessors Office within the 60 day deadline as required by law (Must be signed/dated to be complete):

Submitted by (Print Name): _____ Title: _____ Phone#: _____

Signature: _____ Date: _____