

Parking Income

1. Does the property have the following?

Parking Type	# of Stalls	Monthly Rent	Monthly Discount?
Enclosed – Heated	_____	\$ _____	\$ _____
Enclosed – Unheated	_____	\$ _____	\$ _____
Carpport	_____	\$ _____	\$ _____

2. Is the parking rented to a 3rd party? No If yes;

i. # of stalls rented: _____ ii. Monthly rent/stall: \$ _____

Other Income (Annual)

Laundry: \$
Pet Fee: \$
Other Income: <i>(Please Specify)</i>

PROPERTY EXPENSES (Actual Building Expenses)

(DO NOT INCLUDE mortgage, bank charges, property taxes, debt charges, depreciation, business expenses or expenses incurred by your tenants)

Expenses	Amount
Advertising / Marketing	\$
City License Fee	\$
Office / Accounting	\$
Owner Paid Utilities	
Electricity	\$
Natural Gas	\$
Water & Sewer	\$
Waste & Recycling	\$
Management Fee:	
<input type="checkbox"/> Self Mgmt:	\$
<input type="checkbox"/> Professional Mgmt	
Caretaker Suite Rent / Wage	\$
Cleaning Supplies	\$
Annual Insurance	\$
Other:	\$
Other:	\$
Other:	\$
Other:	\$

Equipment Replacement	Quantity	Total Cost <i>(During This Year Only)</i>
Fridge		\$
Stove		\$
Washer		\$
Dryer		\$
Dishwasher		\$
Air Conditioner		\$
Other:		\$
Improvement Expenses	Capital Expenses*	Repair Expenses**
Roof	\$	\$
Exterior Finish	\$	\$
Windows & Doors	\$	\$
HVAC	\$	\$
Decks / Balconies	\$	\$
Cabinets	\$	\$
Flooring	\$	\$
Plumbing Fixtures	\$	\$
Painting / Decorating	N/A	\$
Other:	\$	\$
Other:	\$	\$

***Capital Expense** gives a lasting benefit, advantage or extends the useful life of your property or improves it beyond its original condition. (i.e., the cost of replacing a roof - every 20 years)

****Repair Expense** is one that generally reoccurs over a short period. (i.e., the cost of painting the interior of a suite - completed each year)

COMMENTS

APPRAISAL

Was there an appraisal done on the property in the last 3 years? Yes No

If Yes, Date of Appraisal: _____ Purpose of Appraisal: _____ Amount: _____

CERTIFICATION

All information provided herein has been examined by me and is true, current, and complete to the best of my knowledge.

Signature: _____ Name: _____

Daytime Phone No: _____ Email: _____

Date: _____