

# 2015 ANNUAL INCOME AND EXPENSE REPORT SUMMARY

Owner \_\_\_\_\_  
 Mailing Address \_\_\_\_\_  
 City / State / Zip \_\_\_\_\_

Property Name \_\_\_\_\_  
 Property Address \_\_\_\_\_  
 Map / Block / Lot \_\_\_\_\_ (Fill in from the Front Instruction Page)

- |   |              |           |               |                             |                    |               |                |
|---|--------------|-----------|---------------|-----------------------------|--------------------|---------------|----------------|
| 1. Primary Property Use (Circle One)                    | A. Apartment | B. Office | C. Rental     | D. Mixed Use                | E. Shopping Center | F. Industrial | G. Other _____ |
| 2. Gross Building Area (Including Owner Occupied Space) | _____        | _____     | _____ Sq. Ft. | 6. Number of Parking Spaces | _____              | _____         | _____          |
| 3. Net Leasable Area                                    | _____        | _____     | _____ Sq. Ft. | 7. Actual Year Built        | _____              | _____         | _____          |
| 4. Owner-Occupied Area                                  | _____        | _____     | _____ Sq. Ft. | 8. Year Remodeled           | _____              | _____         | _____          |
| 5. Number of Units                                      | _____        | _____     | _____         |                             |                    |               |                |

## INCOME – 2015

9. Apartment Rental (From Schedule A) \_\_\_\_\_  
 10. Office Rentals (From Schedule B) \_\_\_\_\_  
 11. Retail Rentals (From Schedule B) \_\_\_\_\_  
 12. Mixed Rentals (From Schedule B) \_\_\_\_\_  
 13. Shopping Center Rentals (From Schedule B) \_\_\_\_\_  
 14. Industrial Rentals (From Schedule B) \_\_\_\_\_  
 15. Other Rentals (From Schedule B) \_\_\_\_\_  
 16. Parking Rentals \_\_\_\_\_  
 17. Other Property Income \_\_\_\_\_  
 18. **TOTAL POTENTIAL INCOME** (Add Line 9 Through Line 17) \_\_\_\_\_  
 19. Loss Due to Vacancy and Credit \_\_\_\_\_  
 20. **EFFECTIVE ANNUAL INCOME** (Line 18 Minus Line 19) \_\_\_\_\_

## EXPENSES – 2015

21. Heating/Air Conditioning \_\_\_\_\_  
 22. Electricity \_\_\_\_\_  
 23. Other Utilities \_\_\_\_\_  
 24. Payroll (Except management, repair & decorating) \_\_\_\_\_  
 25. Supplies \_\_\_\_\_  
 26. Management \_\_\_\_\_  
 27. Insurance \_\_\_\_\_  
 28. Common Area Maintenance \_\_\_\_\_  
 29. Leasing Fees/Commissions/Advertising \_\_\_\_\_  
 30. Legal and Accounting \_\_\_\_\_  
 31. Elevator Maintenance \_\_\_\_\_  
 32. Security \_\_\_\_\_  
 33. Other (Specify) \_\_\_\_\_  
 34. Other (Specify) \_\_\_\_\_  
 35. Other (Specify) \_\_\_\_\_  
 36. **TOTAL EXPENSES** (Add Lines 21 Through 35) \_\_\_\_\_  
 37. **NET OPERATING INCOME** (Lines 20 Minus Line 36) \_\_\_\_\_  
 38. Capital Expenses \_\_\_\_\_  
 39. Real Estate Taxes \_\_\_\_\_  
 40. Mortgage Payment (Principal and Interest) \_\_\_\_\_  
 41. Depreciation \_\_\_\_\_  
 42. Amortization \_\_\_\_\_



I DO HEREBY DECLARE UNDER PENALTIES OF FALSE STATEMENT THAT THE FOREGOING INFORMATION, ACCORDING TO THE BEST OF MY KNOWLEDGE, REMEMBRANCE AND BELIEF, IS A COMPLETE AND TRUE STATEMENT OF ALL THE INCOME AND EXPENSES ATTRIBUTABLE TO THE ABOVE IDENTIFIED PROPERTY (Section 12-63c(d) of the Connecticut General Statutes).

\_\_\_\_\_  
 SIGNATURE                      NAME (Print)                      DATE  
 \_\_\_\_\_  
 TITLE                              TELEPHONE

**RETURN TO THE ASSESSOR ON OR BEFORE MAY 30, 2016 TO AVOID THE 10% PENALTY**