

# 2023 ANNUAL INCOME AND EXPENSE REPORT SUMMARY

Owner Name \_\_\_\_\_

Mailing Address \_\_\_\_\_

(if different from front) \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Property Name \_\_\_\_\_

1 Primary Property Use (Check One)

Apartment

Office

Retail

Mixed Use

Shopping Ctr.

Industrial

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

## EXPENSES

9 Apartment Rentals (From Schedule A)

\_\_\_\_\_

21 Heating/Air Conditioning

\_\_\_\_\_

10 Office Rentals (From Schedule B)

\_\_\_\_\_

22 Electricity

\_\_\_\_\_

11 Retail Rentals (From Schedule B)

\_\_\_\_\_

23 Other Utilities

\_\_\_\_\_

12 Mixed Rentals (From Schedule B)

\_\_\_\_\_

24 Payroll (Except management)

\_\_\_\_\_

13 Shopping Center Rentals (From Schedule B)

\_\_\_\_\_

25 Supplies

\_\_\_\_\_

14 Industrial Rentals (From Schedule B)

\_\_\_\_\_

26 Management

\_\_\_\_\_

15 Other Rentals (From Schedule B)

\_\_\_\_\_

27 Insurance

\_\_\_\_\_

16 Parking Rentals

\_\_\_\_\_

28 Common Area Maintenance

\_\_\_\_\_

17 Other Property Income

\_\_\_\_\_

29 Leasing Fees / Commissions / Advertising

\_\_\_\_\_

18 TOTAL POTENTIAL INCOME  
(Add Line 9 Through Line 17)

\_\_\_\_\_

30 Legal and Accounting

\_\_\_\_\_

19 Loss Due to Vacancy and Credit

\_\_\_\_\_

31 Elevator Maintenance

\_\_\_\_\_

20 EFFECTIVE ANNUAL INCOME  
(Line 18 Minus Line 19)

\_\_\_\_\_

32 Tenant Improvements

\_\_\_\_\_

33 General Repairs

\_\_\_\_\_

34 Other (Specify) \_\_\_\_\_

\_\_\_\_\_

35 Other (Specify) \_\_\_\_\_

\_\_\_\_\_

36 Other (Specify) \_\_\_\_\_

\_\_\_\_\_

37 Security

\_\_\_\_\_

38 TOTAL EXPENSES (Add Lines 21 Through 37)

\_\_\_\_\_

39 NET OPERATING INCOME (Line 20 Minus Line 38)

\_\_\_\_\_

40 Capital Expenses

\_\_\_\_\_

41 Real Estate Taxes

\_\_\_\_\_

42 Mortgage Payment (Principal and Interest)

\_\_\_\_\_

RETURN TO THE ASSESSOR ON OR BEFORE JUNE 1, 2024



PURCHASE PRICE	\$ _____	DOWN PAYMENT	\$ _____	DATE OF PURCHASE	_____
DATE OF LAST APPRAISAL	_____	APPRAISAL FIRM	_____	APPRAISED VALUE	_____
FIRST MORTGAGE	\$ _____	INTEREST RATE	_____ %	PAYMENT SCHEDULE TERM	_____ YEARS
SECOND MORTGAGE	\$ _____	INTEREST RATE	_____ %	PAYMENT SCHEDULE TERM	_____ YEARS
OTHER	\$ _____	INTEREST RATE	_____ %	PAYMENT SCHEDULE TERM	_____ YEARS
CHattel MORTGAGE	\$ _____	INTEREST RATE	_____ %	PAYMENT SCHEDULE TERM	_____ YEARS

(Check One)	
FIXED	VARIABLE

DID THE PURCHASE PRICE INCLUDE A PAYMENT FOR:      FURNITURE? \$ \_\_\_\_\_ (Value)      EQUIPMENT? \_\_\_\_\_ (Value)      OTHER (Specify) \$ \_\_\_\_\_ (Value)

HAS THE PROPERTY BEEN LISTED FOR SALE SINCE YOUR PURCHASE?      (Check One)      YES       NO

IF YES, LIST THE ASKING PRICE \$ \_\_\_\_\_      DATE LISTED \_\_\_\_\_      BROKER \_\_\_\_\_

Remarks - Please explain any special circumstances or reasons concerning your purchase (i.e., vacancy, conditions of sale, etc.) \_\_\_\_\_

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 \_\_\_\_\_