

Town of North Branford Assessor's Office

Multi-Family Property

(Five or more units)

Income and Expense Survey for Calendar Year 2010

Information provided is CONFIDENTIAL, in accordance with Connecticut Law

Property Name: _____

Property Address: _____

Form Preparer/Position: _____

Telephone Number: _____

Gross Building Area (GBA): _____ square feet

Rentable Floor Area: _____ square feet

Parking Available: _____ (number of spaces)

<u>Apartment Configuration and Typical Lease Terms</u>				
Unit Configuration	Number of Units:		Area (Sq. Ft.)	Typical Rent/Month
	Furnished	Unfurnished		
Efficiency/studio	<input type="checkbox"/>	<input type="checkbox"/>	_____	\$
Total Rooms/BRs/Baths:				
/ / /	<input type="checkbox"/>	<input type="checkbox"/>	_____	\$
/ / /	<input type="checkbox"/>	<input type="checkbox"/>	_____	\$
/ / /	<input type="checkbox"/>	<input type="checkbox"/>	_____	\$
/ / /	<input type="checkbox"/>	<input type="checkbox"/>	_____	\$
/ / /	<input type="checkbox"/>	<input type="checkbox"/>	_____	\$
/ / /	<input type="checkbox"/>	<input type="checkbox"/>	_____	\$
/ / /	<input type="checkbox"/>	<input type="checkbox"/>	_____	\$
/ / /	<input type="checkbox"/>	<input type="checkbox"/>	_____	\$

Potential Annual Gross Income

Apartment Rent at 100% (including employees apartment(s)) x 12 months = \$ _____

Other Income (laundry, vending, etc.) \$ _____

Gross Potential Annual Income \$ _____

Indicate which of the following items are included in the rent:

- Water & Sewer Electricity Cable TV Heat
 Refrigerator Stove/Range Dishwasher
 Other (explain): _____

Annual vacancy for 200X: _____ % Current # units vacant: _____

(Multi-family Property Contd.)

Vacancy and Collection Loss (annualized): \$ _____

Effective Gross Income (Potential less vacancy) \$ _____

Annual Operating Expenses

Fixed Expenses

Real Estate Taxes \$ _____

Personal Property Taxes \$ _____

Property Insurance \$ _____

Variable Expenses

Repairs and Maintenance \$ _____

Reserves \$ _____

Utilities \$ _____

Security \$ _____

Administrative Costs \$ _____

Management Fee \$ _____

Services \$ _____

Other (explain) \$ _____

Total Operating Expenses: \$ _____

Net Operating Income: \$ _____

Please include your Income Summary, rent roll & typical lease.

Yes No

Do any of the figures include capital expenditures or extraordinary costs which vary from typical operating expenses? If yes, please explain on a separate page and attach any other comments or information which may be helpful in understanding the nature of your property and applicable lease(s).

Signature/Position

Date