

# ANNUAL INCOME AND EXPENSE SUMMARY REPORT

<b>Parcel ID:</b>			
<b>Property Address:</b>			
<b>Owner:</b>			
1. Primary Property Use: Apartment___ Office:___ Retail___ Industrial___ Mixed Use___ Other___			
2. Gross Building Area (SF)		6. Number of Units	
3. Net Leasable Area (SF)		7. Number of Parking Spaces	
4. Owner Occupied Area (SF)		8. Actual Year Built	
5. Common Area (SF)		9. Year Remodeled	

<b>INCOME - 2025</b>		<b>EXPENSES – 2025</b>	
10. Apartment Rentals (Sched. A)	\$	22. Advertising	\$
11. Office Rentals (Sched. B)	\$	23. Cleaning and Maintenance (Includes Snow Removal and Trash Removal)	\$
12. Retail Rentals (Sched. B)	\$	24. Commissions/Leasing Fees	\$
13. Industrial Rentals (Sched. B)	\$	25. Insurance (Building Only)	\$
14. Mixed Use Rentals (Sched. C)	\$	26. Professional & Legal Fees	\$
15. Other Rentals	\$	27. Management/Admin Fees	\$
16. Parking Rentals	\$	28. Repairs and Maintenance	\$
17. Common Area Maint. (CAM)	\$	29. Supplies	\$
18. Other Property Income (billboard, cell tower, etc.)	\$	30. Utilities (paid by owner)	\$
19. Total Potential Gross Income	\$	31. Other	\$
20. Vacancy and Collection Loss	\$	32. Reserves for Replacement	\$
<b>21. Effective Gross Annual Income</b> <i>(Subtract Line 20 from Line 19)</i>	\$	<b>33. Total Expenses</b> <i>Add lines 22 to 33</i>	\$

**Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**Printed Name/Title** \_\_\_\_\_ **Email** \_\_\_\_\_

*The above identified property is owner occupied* \_\_\_\_\_

*The above identified property is leased to a related person, corporation, or business entity* \_\_\_\_\_

## SCHEDULE A: Apartment Rental Income

Property Location:	Apartment Property	Calendar Year: 2025
Parcel ID:	Rental Income Statement	Submitted By:

**Residential Rental Information: Please provide the following rental information.**

Unit Type	No. of Units	Room Count		Monthly Rent		Typical Lease Term	Includes the following:
	Total	Rooms	Bath-room	Per Unit	Total	Lease or Tenant at Will (TAW)	W: Water Sewer E: Electricity Heat: Oil/Gas/Elec Other: Explain
Single Room Occupancy(SRO)							
Studio							
1 Bedroom							
2 Bedroom							
3 Bedroom							
4 Bedroom							
Other Rentable Units (Furnished Units)							
Owner/Manager/Janitor Occupied							
<b>SUBTOTAL</b>							
Garage Parking Space							
Outdoor Parking Space							
Other Income (Specify)							
<b>TOTAL</b>							

*COPY AND ATTACH ADDITIONAL PAGES (IF NEEDED)*