

OFFICE BUILDING / RETAIL STORES

BUSINESS OR BUILDING NAME: _____

COUNTY ____ BOOK ____ MAP ____ PARCEL ____ (IF THIS IS AN ECONOMIC UNIT, LIST THE LEAD PARCEL)

GROSS SQUARE FEET = _____ NET LEASEABLE SQUARE FEET = _____

TYPE OF LEASE: GROSS NET TRIPLE NET (NNN) OTHER (DESCRIBE) _____

IS PROPERTY OWNER OCCUPIED? NO YES PARTIAL OWNER'S SQUARE FEET _____

COMPLETE TENANT INFORMATION MUST BE ENTERED ON THE ATTACHED FORM OR ON SEPARATE SHEETS.

<u>POTENTIAL CHARGES TO TENANTS</u>	<u>TENANT PAYS</u>	<u>DESCRIBE</u>
COMMON AREA MAINTENANCE	NONE <input type="checkbox"/> ALL <input type="checkbox"/> PARTIAL <input type="checkbox"/>	_____
TAXES	NONE <input type="checkbox"/> ALL <input type="checkbox"/> PARTIAL <input type="checkbox"/>	_____
INSURANCE	NONE <input type="checkbox"/> ALL <input type="checkbox"/> PARTIAL <input type="checkbox"/>	_____
MANAGEMENT	NONE <input type="checkbox"/> ALL <input type="checkbox"/> PARTIAL <input type="checkbox"/>	_____
UTILITIES	NONE <input type="checkbox"/> ALL <input type="checkbox"/> PARTIAL <input type="checkbox"/>	_____

INCOME DATA SUMMARY: Provide latest three year history.

	Last Year	Two Years Ago	Three Years Ago
	Year: _____	Year: _____	Year: _____
POTENTIAL GROSS INCOME (100% OCCUPANCY) =	\$ _____	\$ _____	\$ _____
VACANCY AND COLLECTION LOSS (ACTUAL)	- _____	- _____	- _____
ADJUSTED GROSS INCOME	= _____	_____	_____
CHARGES TO TENANTS	+ _____	+ _____	+ _____
OVERAGE RENTS	+ _____	+ _____	+ _____
OTHER INCOME (SERVICE, MISC., ETC.)	+ _____	+ _____	+ _____
EFFECTIVE GROSS INCOME	= _____	_____	_____
TOTAL OF ALL EXPENSES	- _____	- _____	- _____
NET OPERATING INCOME	\$ _____	\$ _____	\$ _____

ADDITIONAL INFORMATION / REMARKS

NOTE: Any additional information or documents that support the filed income and expense data may be submitted with this form.

OFFICE BUILDING / RETAIL STORES
PROVIDE THREE YEAR HISTORY

NOTE: FOR PROPER ANALYSIS, ALL EXPENSES REPORTED SHOULD BE THE **ACTUAL** INCURRED EACH YEAR.

DISALLOWED EXPENSES: DEPRECIATION, MORTGAGE DEBT SERVICE and PROPERTY TAX (effective tax rate will be added to the capitalization rate).

Last Year	Two Years Ago	Three Years Ago	
Year: _____	Year: _____	Year: _____	
<u>ACTUAL EXPENSES</u>			
ANNUAL INSURANCE	\$ _____	\$ _____	\$ _____
MANAGEMENT / AGENT FEES	_____	_____	_____
ADVERTISING / PROMOTION	_____	_____	_____
GAS / ELECTRIC	_____	_____	_____
WATER / SEWER	_____	_____	_____
TELEPHONE	_____	_____	_____
BLDG. MAINTENANCE AND REPAIRS	_____	_____	_____
PARKING LOT AND COMMON AREA	_____	_____	_____
SERVICE CONTRACTS	_____	_____	_____
JANITORIAL	_____	_____	_____
SUPPLIES	_____	_____	_____
OTHER EXPENSES (DESCRIBE):	<hr/> <hr/> <hr/> <hr/>		
<u>MAJOR REPLACEMENTS / REPAIRS</u> (From Pg. 3)	\$ _____	\$ _____	\$ _____
<u>TOTAL OF ALL EXPENSES=</u>	\$ _____	\$ _____	\$ _____

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LAST YEAR

MAJOR REPLACEMENT / REPAIRS

	DATE (MO / YR)	TOTAL COST	÷	AVG. LIFE (YRS)	=	ANNUAL AMT.
HEATING / COOLING	_____	\$_____	÷	_____	=	\$_____
ROOFING	_____	\$_____	÷	_____	=	\$_____
FLOOR COVERINGS	_____	\$_____	÷	_____	=	\$_____
APPLIANCES / WATER HEATER	_____	\$_____	÷	_____	=	\$_____
PAINTING (MULTI-UNIT)	_____	\$_____	÷	_____	=	\$_____
OTHERS						
(DESCRIBE: _____ _____)		\$_____	÷	_____	=	\$_____
				TOTAL FOR LAST YEAR	=	\$_____

TWO YEARS AGO

MAJOR REPLACEMENT / REPAIRS

	DATE (MO / YR)	TOTAL COST	÷	AVG. LIFE (YRS)	=	ANNUAL AMT.
HEATING / COOLING	_____	\$_____	÷	_____	=	\$_____
ROOFING	_____	\$_____	÷	_____	=	\$_____
FLOOR COVERINGS	_____	\$_____	÷	_____	=	\$_____
APPLIANCES / WATER HEATER	_____	\$_____	÷	_____	=	\$_____
PAINTING (MULTI-UNIT)	_____	\$_____	÷	_____	=	\$_____
OTHERS						
(DESCRIBE: _____ _____)		\$_____	÷	_____	=	\$_____
				TOTAL FOR TWO YEARS AGO	=	\$_____

THREE YEARS AGO

MAJOR REPLACEMENT / REPAIRS

	DATE (MO / YR)	TOTAL COST	÷	AVG. LIFE (YRS)	=	ANNUAL AMT.
HEATING / COOLING	_____	\$_____	÷	_____	=	\$_____
ROOFING	_____	\$_____	÷	_____	=	\$_____
FLOOR COVERINGS	_____	\$_____	÷	_____	=	\$_____
APPLIANCES / WATER HEATER	_____	\$_____	÷	_____	=	\$_____
PAINTING (MULTI-UNIT)	_____	\$_____	÷	_____	=	\$_____
OTHERS						
(DESCRIBE: _____ _____)		\$_____	÷	_____	=	\$_____
				TOTAL FOR THREE YEARS AGO	=	\$_____

NOTE: Any additional information or documents that support the filed income and expense data may be submitted with this form.

OFFICE BUILDING / RETAIL STORES TENANT LIST

NOTE: Use additional copies of this form, if necessary.