

MOBILE HOME / RECREATIONAL VEHICLE PARKS

NAME OF PARK: _____

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

TYPE OF SPACE	NO. OF UNITS	MONTHLY RENT	ANNUAL RENT (12 Months)	UTILITIES INCLUDED?
SINGLE WIDE	_____ x	\$ _____ =	_____ x \$ _____	YES <input type="checkbox"/> NO <input type="checkbox"/>
DOUBLE WIDE	_____ x	\$ _____ =	_____ x \$ _____	YES <input type="checkbox"/> NO <input type="checkbox"/>
TRAVEL TRAILER / RV	_____ x	\$ _____ =	_____ x \$ _____	YES <input type="checkbox"/> NO <input type="checkbox"/>
PARK MODELS	_____ x	\$ _____ =	_____ x \$ _____	YES <input type="checkbox"/> NO <input type="checkbox"/>
TOTAL	=		\$ _____	

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	- _____	- _____	- _____
ADJUSTED GROSS INCOME	= _____	_____	_____
MISCELLANEOUS / OTHER INCOME	+ _____	+ _____	+ _____
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.

MOBILE HOME / RECREATIONAL VEHICLE PARKS EXPENSE DATA

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

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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.