

2019 ANNUAL INCOME AND EXPENSE REPORT SUMMARY

Owner Name _____ Property Location _____
Mailing Address _____ Property Name _____
City/State/Zip _____ Property Manager Name & Phone _____
Owner's Phone _____

Primary Property Use (Check One)

☐ Apartment ☐ Office ☐ Retail ☐ Mixed Use ☐ Automotive ☐ Industrial ☐ Other _____

Gross Building Area

(Including Owner-Occupied Space)

Net Leasable Area

Owner-Occupied Area

Number Of Units

Sq. Ft.

Sq. Ft.

Sq. Ft.

Has the building been remodeled?

What year was this done?

INCOME

1 Apartment Rent (From Schedule A) _____
2 Retail, Office + Commercial Rents (From Schedule B) _____
3 Other Rent _____
4 Other Property Income _____
6 **TOTAL POTENTIAL INCOME** (Sum Lines 1 - 4) _____
5 Vacancy & Collection Loss _____
6 **EFFECTIVE ANNUAL INCOME** (Line 6 Minus Line 5) _____

Signature of Preparer

Name

Date

Phone number of Preparer

EXPENSES

7 Heating/Air Conditioning _____
8 Electricity _____
9 Other Utilities (Specify) _____
10 Payroll (Except management) _____
11 Supplies _____
12 Management _____
13 Insurance _____
14 Common Area Maintenance _____
15 Leasing Fees / Commissions / Advertising _____
16 Legal and Accounting _____
17 Elevator Maintenance _____
18 Tenant Improvements _____
19 General Repairs _____
20 Other (Specify) _____
21 Other (Specify) _____
22 Other (Specify) _____
23 Security _____
24 **TOTAL EXPENSES** (Sum Lines 7 - 23) _____
25 **NET OPERATING INCOME** (Line 6 Minus Line 24) _____
26 Capital Expenses _____

RETURN TO THE ASSESSOR ON OR BEFORE AUGUST 15, 2020*

* In accordance with Connecticut General Statute 12-63c; Ned Lamont Executive Order 7I, Section 15, dated 3/21/2020;
and Ned Lamont Executive Order 7S, Section 10, dated 4/1/2020.