

**2015 ANNUAL INCOME AND EXPENSE REPORT SUMMARY - ASHFORD, CT**

Owner Name \_\_\_\_\_ Property Location \_\_\_\_\_  
 Mailing Address \_\_\_\_\_  
 \_\_\_\_\_  
 Phone Number \_\_\_\_\_  
 City/State/Zip \_\_\_\_\_

1 **Primary Property Use** (Check One)     Apartment     Office     Retail     Mixed Use     Industrial     Other \_\_\_\_\_

2 Gross Building Area \_\_\_\_\_ Sq. Ft.    6 Number of Parking Spaces \_\_\_\_\_  
 (Including Owner-Occupied Space) \_\_\_\_\_  
 3 Net Leasable Area \_\_\_\_\_ Sq. Ft.    7 Actual Year Built \_\_\_\_\_  
 4 Owner-Occupied Area \_\_\_\_\_ Sq. Ft.    8 Year Remodeled \_\_\_\_\_  
 5 Number Of Units \_\_\_\_\_

**INCOME**

9 Apartment Rentals (From Schedule A) \_\_\_\_\_  
 10 Office Rentals (From Schedule B) \_\_\_\_\_  
 11 Retail Rentals (From Schedule B) \_\_\_\_\_  
 12 Industrial Rentals (From Schedule B) \_\_\_\_\_  
 13 Other Rentals (From Schedule B) \_\_\_\_\_  
 14 Parking Rentals \_\_\_\_\_  
 15 Other Property Income \_\_\_\_\_  
     Source \_\_\_\_\_  
 16 **TOTAL POTENTIAL INCOME** \_\_\_\_\_  
     (Add Line 9 Through Line 15)  
 17 Loss Due to Vacancy and Collection \_\_\_\_\_  
 18 **EFFECTIVE ANNUAL INCOME** \_\_\_\_\_  
     (Line 16 Minus Line 17)

**EXPENSES**

19 Heating/Air Conditioning \_\_\_\_\_  
 20 Electricity \_\_\_\_\_  
 21 Water + Sewer \_\_\_\_\_  
 22 Payroll (Except management) \_\_\_\_\_  
 23 Supplies \_\_\_\_\_  
 24 Management \_\_\_\_\_  
 25 Insurance \_\_\_\_\_  
 26 Grounds, lawn, snow \_\_\_\_\_  
 27 Leasing Fees / Commissions /Adv. \_\_\_\_\_  
 28 Legal and Accounting \_\_\_\_\_  
 29 Tenant Improvements \_\_\_\_\_  
 30 General Repairs \_\_\_\_\_  
 31 Rubbish Removal \_\_\_\_\_  
 32 Other (Specify) \_\_\_\_\_  
 33 Other (Specify) \_\_\_\_\_  
 34 Other (Specify) \_\_\_\_\_  
 35 Security \_\_\_\_\_  
**TOTAL EXPENSES** \_\_\_\_\_  
 (Add Lines 19 Through 35)  
 36 **NET OPERATING INCOME** \_\_\_\_\_  
     (Line 18 Minus Line 35)  
     Capital Expenses \_\_\_\_\_  
     Real Estate Taxes \_\_\_\_\_

I DO HEREBY DECLARE UNDER PENALTIES OF FALSE STATEMENT THAT THE FOREGOING INFORMATION, ACCORDING TO THE BEST OF MY KNOWLEDGE, REMEMBRANCE AND BELIEF, IS A COMPLETE AND TRUE STATEMENT OF ALL THE INCOME AND EXPENSES ATTRIBUTABLE TO THE ABOVE IDENTIFIED PROPERTY (Section 12-63c(d) of the Connecticut General Statutes).

SIGNATURE \_\_\_\_\_  
 NAME (Print) \_\_\_\_\_  
 TITLE \_\_\_\_\_  
 DATE \_\_\_\_\_  
 TELEPHONE \_\_\_\_\_

**RETURN TO THE ASSESSOR ON OR BEFORE JUNE 1, 2016**