ASSISTED LIVING INCOME QUESTIONNAIRE

FOR THE 36 MONTHS FROM: <u>2021</u> TO <u>2023</u>

NAME AND LOCATION OF PROPERTY

OWNER AND ADDRESS OF RECORD

RENT SCHEDULES:	# UNITS	BATH/UNITS	2021 RENT/MO.	2022 RENT/MO.	2023 RENT/MO.	
EFFICIENCY						
1 BEDROOM						
2 BEDROOMS						
PARKING # SPACES						
COMMERCIAL:	# UNITS	AREA SF	2021 RENT/SF	2022 RENT/SF	2023 RENT/SF	
RETAIL / OFFICES						
OTHER (LIST)						
ACTUAL INCOME & EXPENSES ARE R	EQUIRED. AN ITE	MIZED COMPUTER	PRINTOUT MAY BE AT	TACHED IN LIEU OF	FILLING OUT THIS	SECTION,
SUBJECT TO REVIEW.						
ANNUAL INCOME:			2021	2022		2023
1. TOTAL GROSS RENTS @ 100% C	CCUPANCY	\$		\$	\$	
2. OWNER, JANITOR, MANAGER A	APARTMENTS	\$		\$	\$	
3. OTHER INCOME (LIST)		\$		\$	\$	
4. LOSS DUE TO VACANCY OR BAD) DEBT	\$		\$	\$	
5. TOTAL ACTUAL INCOME (LINES	1-4)	\$		\$	\$	
EXPENSES:						
6. PAYROLL (EXCEPT MANAGER, R	(EPAIR)	\$		\$	\$	
7. SUPPLIES (JANITOR, BULBS, ETC	2.)	\$		\$	\$	
8. ELECTRICITY & UTILITIES		\$		\$	\$	
9. HEATING FUEL (TYPE OF FUEL_)	\$		\$	\$	
10. MANAGEMENT FEES/WAGES		\$		\$	\$	
11. ADMINISTRATIVE COST (LIST)		\$		\$	\$	
12. MAINTENANCE & REPAIRS (LIST	Γ)	\$		\$	\$	
13. FOOD & BEVERAGE COST		\$		\$	\$	
14. HOUSEKEEPING, LAUNDRY & LI	NEN	\$		\$	\$	
15. NURSING		\$		\$	\$	
16. RESIDENT ACTIVITIES		\$		\$	\$	
17. MISCELLANEOUS EXPENSES (LIS	šT)	\$		\$	\$	
18. FIRE INSURANCE & EXTENDED	COVERAGE	\$		\$	\$	
19. RESERVES FOR REPLACEMENTS	(LIST)	\$		\$	\$	
20. REAL ESTATE TAXES		\$		\$	\$	
21. BUILDING DEPRECIATION		\$		\$	\$	
22. MORTGAGE INTEREST PAYMEN	IT	\$		\$	\$	
MORTGAGE/SALES INFORMATION:						
1. IS THERE A CURRENT MOR	TGAGE ON THE P	PROPERTY? Yes	No	IF YES, PLEASE PRO	OVIDE THE FOLLOW	/ING DATA:
NAME OF MORTGAGEE	LOA	N AMOUNT	MONTHLY PAYMENT	INTEREST RATE	TERM OF MORTO	GAGE
PLEASE PROVIDE: DATE PURC	HASED		CONSIDERATION		<u></u>	
2. IS THERE A CONTROLLING	LEASE OR MANA	GEMENT AGREEME	ENT?()YES ()NO			
IF SO, SUMMARIZE THE	TERM AND CON	DITIONS OF THE AG	GREEMENT TYPE: () MA	ANAGEMENT () L	EASE () SALE-LEA	ASEBACK
LESSEE OR MANAGEME	NT COMPANY: _		DATE	TERM	FEE	
I DECLARE, UNDER THE PENALTIES OF EXAMINED BY ME AND ARE TRUE, CORR					DULES AND STATEM	ENTS HAVE BEEN
Owner's Signature	Title	of Signer		Date		
Print/Type Name of Signer	Phor	ne Number		Email		<u> </u>

RP-6A (REV. 1/2024)