

APARTMENT INCOME AND EXPENSE QUESTIONNAIRE

FOR THE 36 MONTHS: FROM 2009 TO 2011

NAME AND LOCATION OF PROPERTY _____

OWNER AND ADDRESS OF RECORD _____

Check Services & Utilities in Rent: Heat () A/C () Gas () Electricity ()
 Carpets () Drapes () Washer/Dryer () Swimming Pool () Party Room ()
 Tennis () Parking () Switchboard () Security ()

RENT SCHEDULES:

	<u># UNITS</u>	<u>BATH/UNIT</u>	<u>2011 RENT/MO.</u>	<u>2010 RENT/MO.</u>	<u>2009 RENT/MO.</u>
Efficiency	_____	_____	_____	_____	_____
1 Bedroom	_____	_____	_____	_____	_____
2 Bedroom	_____	_____	_____	_____	_____
2 Bedroom & Den	_____	_____	_____	_____	_____
3 Bedroom	_____	_____	_____	_____	_____
3 Bedroom & Den	_____	_____	_____	_____	_____
Other (List)	_____	_____	_____	_____	_____
PARKING # SPACES	_____	_____	_____	_____	_____

<u>Retail/Commercial:</u>	<u># UNITS</u>	<u>LEASABLE</u>	<u>RENT/SF</u>	<u>RENT/SF</u>	<u>RENT/SF</u>
Shops/Stores	_____	_____	_____	_____	_____
Offices	_____	_____	_____	_____	_____
Other (List)	_____	_____	_____	_____	_____

ANNUAL INCOME:

	<u>2011</u>	<u>2010</u>	<u>2009</u>
1. Total Gross Rents (100% Occupancy)	\$ _____	_____	_____
2. Owner, Janitor, Manager Apartments	\$ _____	_____	_____
3. Other Income (laundry, pool, etc.)	\$ _____	_____	_____
4. Loss due to vacancy or delinquent.	\$ _____	_____	_____
5. TOTAL ACTUAL INCOME (Total lines 1-4)	\$ _____	_____	_____

EXPENSES:

6. Payroll (except manager, repair)	\$ _____	_____	_____
7. Supplies (janitor, bulbs, etc.)	\$ _____	_____	_____
8. Electricity	\$ _____	_____	_____
9. Water/Sewage	\$ _____	_____	_____
10. Fuel (Type of fuel: _____)	\$ _____	_____	_____
11. Management Fees/Wages	\$ _____	_____	_____
12. Administrative Costs (List)	\$ _____	_____	_____
13. Maintenance & Repairs (List)	\$ _____	_____	_____
14. Miscellaneous Expenses (List)	\$ _____	_____	_____
15. Fire Insurance & Extend. Coverage	\$ _____	_____	_____
16. Reserves for Replacements (List)	\$ _____	_____	_____
17. TOTAL EXPENSES (Total lines 6-16)	\$ _____	_____	_____
18. Net Operating Income (Line 5 less line 17)	\$ _____	_____	_____
19. Real Estate Taxes	\$ _____	_____	_____
20. Mortgage Payment	\$ _____	_____	_____
21. Building Depreciation	\$ _____	_____	_____
22. Capital Expenditure	\$ _____	_____	_____

MORTGAGE/SALES INFORMATION:

1. Is there a current mortgage on this property? Yes _____ No _____

2. If Yes, please provide the following data:

Name of Mortgagee

Mortgage Amount

Interest Rate

Term of Mortgage

Date 1st Payment

Monthly Payment

3. Please provide: Date Purchased _____ Consideration _____

I declare, under the penalties of perjury, that the contents of this form and all the accompanying schedules and statements have been examined by me and are true, correct, and complete to the best of my knowledge, information, and belief.

Signature

Title of Signer

Date

Print/Type Name of Signer

Phone Number

RP-6 (Rev.12/03 rs)