MOBILE HOME PARK
INCOME QUESTIONNAIRE FOR THE 36 MONTHS FROM ___2012___ TO ___2014___

NAME AND LOCATION OF PROPERTY  OWNER AND ADDRESS OF RECORD

Check Services & Utilities included rent:
Water ( ) Septic ( ) Cable TV ( ) Laundry ( ) Yard Maint. ( ) Off-Road Parking ( ) Patio ( ) Repair Service ( )
Other (list)_________________________________________________

Number of spaces available:______________ Number of spaces occupied:_____________________________

Rent Range: $______________ to $_______________ Per Month

Lease Term (# of each): Annual_________  Semi-Annual_________ Monthly_________

Number of New Tenants this year: ________________

ANNUAL INCOME:

1. Trailer Space - 100% Occupancy $_________ _________ _________
2. Spaces for Owner, Manager, etc. $_________ _________ _________
3. Apartment Rental – 100% Occupancy $_________ _________ _________
4. Loss due to vacancy or delinquency $_________ _________ _________
5. Total Income $_________ _________ _________

EXPENSES:

1. Payroll (except manager, repair) $_________ _________ _________
2. Supplies (janitor, bulbs, etc.) $_________ _________ _________
3. Electricity $_________ _________ _________
4. Water/Sewer $_________ _________ _________
5. Fuel (Type of fuel__________) $_________ _________ _________
6. Management Fees/Wages $_________ _________ _________
7. Common Area Maintenance $_________ _________ _________
8. Administrative Cost (List) $_________ _________ _________
9. Maintenance & Repairs (List) $_________ _________ _________
10. Real Estate Tax $_________ _________ _________
11. Mortgage Payment $_________ _________ _________
12. Excise Tax $_________ _________ _________
13. TOTAL EXPENSES (Lines 1-12) $_________ _________ _________

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-10 (Rev. 12/04rs)