

MARYLAND STATE DEPARTMENT OF ASSESSMENTS & TAXATION
COMMERCIAL/ INDUSTRIAL QUESTIONNAIRE

INCOME QUESTIONNAIRE FOR THE 36 MONTHS FROM: 2015 TO 2017

NAME AND LOCATION OF PROPERTY

OWNER AND ADDRESS OF RECORD

PRESENT % USE OF PROPERTY (STORE, OFFICE, WAREHOUSE, ETC.) _____

SERVICES & UTILITIES INCLUDED IN RENT: () HEAT () A/C () GAS () ELECTRIC () JANITOR

OTHER (LIST) _____

GROSS BLDG. SF _____ NET BLDG. SF _____ PARKING SPACES _____

INTERIOR FINISH WAS PROVIDED BY: () OWNER () TENANT

ANNUAL INCOME:

	<u>2017</u>	<u>2016</u>	<u>2015</u>
1. RETAIL SPACE @ 100% OCCUPANCY	\$ _____	\$ _____	\$ _____
2. OFFICE RENTALS @ 100% OCCUPANCY	\$ _____	\$ _____	\$ _____
3. OTHER RENTALS @ 100% OCCUPANCY	\$ _____	\$ _____	\$ _____
4. OVERAGE (PERCENTAGE) RENTS	\$ _____	\$ _____	\$ _____
5. MISCELLANEOUS (LIST)	\$ _____	\$ _____	\$ _____
6. TOTAL POSSIBLE INCOME (LINES 1-5)	\$ _____	\$ _____	\$ _____
7. LOSS DUE TO VACANCY OR BAD DEBT	\$ _____	\$ _____	\$ _____
8. TOTAL ACTUAL INCOME (LINE 6 LESS LINE 7)	\$ _____	\$ _____	\$ _____

EXPENSES:

9. PAYROLL (EXCEPT MANAGER, REPAIR)	\$ _____	\$ _____	\$ _____
10. SUPPLIES (JANITOR, BULBS, ETC.)	\$ _____	\$ _____	\$ _____
11. ELECTRICITY	\$ _____	\$ _____	\$ _____
12. WATER/SEWER	\$ _____	\$ _____	\$ _____
13. FUEL (TYPE OF FUEL _____)	\$ _____	\$ _____	\$ _____
14. GAS	\$ _____	\$ _____	\$ _____
15. MANAGEMENT FEES/WAGES	\$ _____	\$ _____	\$ _____
16. LEASING FEES/WAGES	\$ _____	\$ _____	\$ _____
17. COMMON AREA MAINTENANCE	\$ _____	\$ _____	\$ _____
18. MAINTENANCE & REPAIRS (LIST)	\$ _____	\$ _____	\$ _____
19. ADMINISTRATIVE COST (LIST)	\$ _____	\$ _____	\$ _____
20. SERVICES (LIST)	\$ _____	\$ _____	\$ _____
21. MISCELLANEOUS EXPENSES (LIST)	\$ _____	\$ _____	\$ _____
22. FIRE INSURANCE & EXTENDED COVERAGE	\$ _____	\$ _____	\$ _____
23. RESERVES FOR REPLACEMENTS (LIST)	\$ _____	\$ _____	\$ _____
24. TOTAL EXPENSES (LINES 9 - 23)	\$ _____	\$ _____	\$ _____
25. NOI (LINE 8 LESS LINE 24)	\$ _____	\$ _____	\$ _____
26. REAL ESTATE TAXES	\$ _____	\$ _____	\$ _____
27. MORTGAGE PAYMENT	\$ _____	\$ _____	\$ _____
28. BUILDING DEPRECIATION	\$ _____	\$ _____	\$ _____

MORTGAGE/SALES INFORMATION

1. IS THERE A CURRENT MORTGAGE ON THIS PROPERTY? () YES () NO

2. IF YES, PLEASE PROVIDE THE FOLLOWING DATA

NAME OF MORTGAGE _____ 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.

OWNER'S SIGNATURE _____ TITLE OF SIGNER _____ DATE _____

PRINT/TYPER NAME OF SIGNER _____ PHONE NUMBER _____