GARAGE AND PARKING LOT INCOME QUESTIONNAIRE
FOR THE 36 MONTHS FROM: 2019 TO 2021

NAME AND LOCATION OF PROPERTY
OWNER AND ADDRESS OF RECORD

SERVICES & UTILITIES INCLUDED IN RENT: ( ) HEAT ( ) LIGHTING ( ) WATER ( ) VALET ( ) ELEVATOR ( ) SECURITY

NUMBER OF SPACES: ______________ AVERAGE TIME PARKED: __________ AVERAGE PARKING CHARGE: ____________

NUMBER OF BUSINESS DAYS PER YEAR: __________

PARKING RATES: HOUR: __________ DAY: __________ WEEK: __________ MONTH: __________

ACTUAL INCOME & EXPENSES ARE REQUIRED. AN ITEMIZED COMPUTER PRINTOUT MAY BE ATTACHED IN LIEU OF FILLING OUT THIS SECTION.

ANNUAL INCOME:
1. MONTHLY RENTAL INCOME $ _______ $ _______ $ _______
2. WEEKLY RENTAL INCOME $ _______ $ _______ $ _______
3. DAILY & HOURLY RENTAL INCOME $ _______ $ _______ $ _______
4. MISCELLANEOUS INCOME (LIST) $ _______ $ _______ $ _______

EXPENSES:
5. PAYROLL $ _______ $ _______ $ _______
6. SUPPLIES (JANITOR, BULBS, ETC.) $ _______ $ _______ $ _______
7. ELECTRICITY & UTILITIES $ _______ $ _______ $ _______
8. MAINTENANCE & REPAIRS (LIST) $ _______ $ _______ $ _______
9. MISCELLANEOUS EXPENSES (LIST) $ _______ $ _______ $ _______
10. INSURANCE $ _______ $ _______ $ _______
11. LICENSES AND PERMITS $ _______ $ _______ $ _______
12. ADMINISTRATIVE COST (LIST) $ _______ $ _______ $ _______
13. MANAGEMENT FEES $ _______ $ _______ $ _______
14. PARKING TAX $ _______ $ _______ $ _______
15. REAL ESTATE TAXES $ _______ $ _______ $ _______
16. DEPRECIATION $ _______ $ _______ $ _______
17. MORTGAGE INTEREST PAYMENT $ _______ $ _______ $ _______
18. CAPITAL EXPENDITURES (LIST) $ _______ $ _______ $ _______

MORTGAGE/SALES INFORMATION:
1. IS THERE A CURRENT MORTGAGE ON THE PROPERTY? Yes ______ No ______ IF YES, PLEASE PROVIDE THE FOLLOWING DATA:

NAME OF MORTGAGEE ___________________ LOAN AMOUNT $ _______ MONTHLY PAYMENT $ _______ INTEREST RATE _______ TERM OF MORTGAGE _______

2. 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/Type Name of Signer Phone Number Email

RP-60 (REV. 12/2021)