

2022 Commercial Property Information Request Form

Owner Contact								
Roll Number :								
Property Address:								
Property Owner:	Phone Number:							
Building Name:								

Company Representa	tive:(Please print)
Name	
Position	
Company Name	
Phone Number	
E-mail Address	
Follow-Up Contact Po	erson:(If different from above)
Name	
Phone Number	
E-mail Address	
 Leased Partially Leased/Par Entirely Owner Occ Vacant Entire Year IF THIS PROPERTY SHAREHOLDERS/I 	was:(Please check one) tially Owner Occupied upied Y IS 100% OWNER OCCUPIED OR OCCUPIED BY COMPANIES/ INDIVIDUALS THAT ARE <u>RELATED</u> TO THE PROPERTY OWNER, THE CERTIFICATION SECTION ONLY ON THE LAST PAGE AND

Please ensure that each page is initialled and dated by the company representative. If any other comments or notes need to be submitted, please attach separate sheets.

	F	or Office Use On	ly.	
Property Type:		P-use	Code:	
Data Entered by:	Date:			
Reviewed by:	_Date:			
	□ Attributes	🗆 Rent Roll	□I&E Survey	



INCOME AND EXPENSES

FINANCIAL STATEMENTS MAY BE SUBMITTED

Please provide information for the last full year – 2022.

Detailed information for the year ending ______ (if the date is different than December 31 please state the year end date).

Roll#:	ll#: Address:						
	1						
RENTAL INCOME	2022	Comments					
Actual Gross Income							
Parking Income							
Other Income – Explain							
Recoveries – Insurance							
Recoveries – Maintenance/Repairs							
Recoveries – Management							
Recoveries – Property Tax							
Recoveries - Utilities							
Recoveries – Other - Explain							
EFFECTIVE GROSS INCOME							

OPERATING EXPE	ENSES	2022	Comments	
Insurance				
Management Fees				
Administration Fees	5			
Advertising				
Heating				
Electrical				
Water and Sewer				
Building Maintenan	ce and Repairs			
Grounds Maintenan				
Legal and Audit				
Other Operating Ex	penses (Explain)			
Supplies & Material	ls			
Garbage Removal &	z Exterminating			
Rentals	8			
Elevators				
Tenant Improvemen	nts			
Property Taxes				
TOTAL PROPER	TY EXPENSES			
Inducements for t	he Year			
Unit/Bay	Size (Sq Ft)	T.I.'s (\$) Paid by Landlord	d # Months' Rent Free	e Total Rent Free Amount
Vacancy for the Y	ear			
Unit/Bay Vacant	Size (Sq Ft)	# of Months Vacant	Potential or Asking	Net Rent / Sq Ft.
Main Dan andiana/				
Specify Item	Capital Expenditures		\$ Amount	
specify hem			φ ΑΠΙΟΠΙΙ	
nitiale Do	te (DD/MM/YEAR)		1	

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2022 Commercial Rent Roll

You may attach a copy of your rent roll to this page if it includes all of the required information.

						(If	require					for r	nore s	pace)				I	Page	<u> </u>	C	of			
	umber:			~	-		P	rope		Addre										-					
A	1		В	-	ace Desc	-				Lease [nnua	l Le	ase		ails				
				C	D	E	F		G		H	I		Ι	J	Κ				L					Μ
								L	ease l	nforma	tion						Che	ck of	f iten	is pai	d for k	oy own	er		
Tenant/7	Frade Name	Unit #	Lease Type: Net (N) Gross (G)	Floor Location (B,M,Mz,2, etc)	Occupant Type (Owner, Tenant, Vacant)	Space Type (Office, Retail, Apartment, Whse, Restaurant, etc)	Rentable Area (Sq Ft)	The second s	(DD/MMM/YY)	u monun to monun please specify.		Lease Expiry Date		Rent (\$/Square Foot)	Rent (\$/ Month)	Percentage Rent \$	Insurance	Heat	Power	Water/Sewer	Janitor	Maintenance/Repair	Property Tax	Other Explain	Monthly CAM costs If applicable
<u>Example</u>	ABC	101		Main	Tenant	Office	1000	DD	MM	YR	DD	MM	YY	\$10	\$10000	25	1		1						Yes
	Company	101	N	Iviani	Tenant	Office	1000	01	12	2014	01	06	2020	\$10	\$10000	0 23	¥		¥						105
														_											
Initi	als	Da	te (DD/MM	I/YEAR)	/_	/		1	I				1	1					I		1	1 1			



Roll #:		Address:						
PARKING DETAILS	# of Stalls		Rent per Stall (\$)					
Electrified Stalls								
Non – Electrified Stalls								
Unrestricted Public/ Visitor Parking								
Covered Stalls								
Underground Stalls								

CERTIFICATION

I hereby certify that the attached information is true and correct.									
Signature		Title							
Date		Phone	#						
Email									

An appraiser may call to clarify information.

Additional Comments