

**INCOME & EXPENSE DATA WORKSHEET**  
**FOR THE -2021 TOWN OF GREENBURGH REASSESSMENT PROJECT**

Annual Income and Expense Statement

for the year ending: \_\_\_\_\_ PROPERTY ADDRESS: \_\_\_\_\_

PROPERTY USE (check all that apply):  Apartment  Office  Retail  Mixed Use  Shopping Center  Industrial  Other \_\_\_\_\_

CHECK HERE IF ANY PART OF THIS PROPERTY IS OWNER OCCUPIED:

- |  |         |                                      |
|--|---------|--------------------------------------|
| 1. Total gross building area<br>(Including owner-occupied space) _____ | Sq. Ft. | 5. Number of parking spaces _____    |
| 2. Owner-occupied area _____   | Sq. Ft. | 6. Actual Year Built, if known _____ |
| 3. Net Leasable area _____   | Sq. Ft. | 7. Year Remodeled _____              |
| 4. Number of rental units, including owner-occupied _____              |         |                                      |

ACTUAL GROSS INCOME *	LESS, ACTUAL EXPENSES
8. Apartment Rents (From Schedule A) _____	20. Heating fuel _____
9. Office Rents (From Schedule B) _____	21. Gas and electricity _____
10. Retail Rents (From Schedule B) _____	22. Water and sewer _____
11. Mixed Rents (From Schedule B) _____	23. Other utilities _____
12. Shopping Center Rents (From Schedule B) _____	24. Payroll (do not include management) _____
13. Industrial Rents (From Schedule B) _____	25. Supplies _____
14. Other Rents (From Schedule B) _____	26. Management _____
15. Parking Rents _____	27. Insurance _____
16. Other Misc income (e.g. CAM, INS or TAX Reimbursement) _____	28. Common Area Maintenance _____
17. TOTAL ACTUAL GROSS INCOME = _____	29. Leasing Fees/Commissions/Advertising _____
18. Less, losses from vacancy and credit collection _____	30. Legal and Accounting _____
19. EFFECTIVE GROSS ANNUAL INCOME = _____	31. Elevator maintenance _____
	32. Tenant improvements _____
	33. General repairs _____
	34. Other (specify) _____
	35. Other (specify) _____
	36. Other (specify) _____
	37. Reserves _____
	38. Security _____
	39. TOTAL ACTUAL EXPENSES = _____
	40. NET OPERATING INCOME = _____

\* Do not include estimates for vacancies

DO NOT INCLUDE TAXES, DEPRECIATION OR MORTGAGE PAYMENTS AS AN EXPENSE

PROPERTY ADDRESS: \_\_\_\_\_

**SCHEDULE A - APARTMENT RENT SCHEDULE**

Unit Type	No. Of Units				Unit Size	Monthly Rent		Typical Lease Term
	Total	Rented	Rooms	Baths	Sq. Ft.	Per Unit	Total	
Efficiency								
1 Bedroom								
2 Bedroom								
3 Bedroom								
4 Bedroom								
Other rentable units								
Owner/manager occupied								
Subtotal								
Parking								
Other income (specify)								
TOTAL								

~ Complete this section for apartment rentals only ~

**ITEMS INCLUDED IN RENT**

(Check all that apply)

- Heat
- Electricity
- Other utilities
- Air conditioning
- Stove/Refrigerator
- Dishwasher
- Other (specify): \_\_\_\_\_
- Furnishings
- Security
- Pool
- Tennis courts
- Parking
- Garbage disposal

**SCHEDULE B - OTHER NON-APARTMENT RENT SCHEDULE**

~ Complete this section for all other rental areas, except for apartments ~

Tenant Name	Floor Location	Lease Terms				Annual Rent			Parking		Interior Finish			
		Start Date	End Date	Sq. Ft. Rented	Base Mthly Rent \$	Escal/CAM/Overage	Total Rent \$	# of Spaces	Annual Rent \$	Owner Provided	Tenant Provided	If Owner Provided, \$ Cost to Fit Up/Renovate		
TOTAL														

COPY AND ATTACH IF ADDITIONAL PAGES ARE NEEDED

# PURCHASE PRICE VERIFICATION

~ Complete this section if the property was purchased within the last 10 years ~

~ ALL OWNERS MUST SIGN AND DATE THE ATTESTION BELOW ~

Purchase Price \$ \_\_\_\_\_ Down Payment: \$ \_\_\_\_\_ Purchase Date: \_\_\_\_\_

Selling Broker: \_\_\_\_\_ Broker Telephone #: \_\_\_\_\_

Date of Last Appraisal: \_\_\_\_\_ Appraisal Firm: \_\_\_\_\_ Appraised Value: \$ \_\_\_\_\_

First Mortgage: \$ \_\_\_\_\_ Interest Rate: \_\_\_\_\_ % Payment Schedule Term: \_\_\_\_\_ Years  Fixed  Variable

Did the purchase price include monies allocated for: Furniture? \$ \_\_\_\_\_ Equipment? \$ \_\_\_\_\_ Other? \$ \_\_\_\_\_

PROPERTY CONDITION: \_\_\_\_\_ ESTIMATE OF REPAIRS NEEDED AT THE TIME OF SALE: \$ \_\_\_\_\_

Has the property been listed for sale since your purchase?  Yes  No

If yes, provide list price: \$ \_\_\_\_\_ Date listed: \_\_\_\_\_ Listing broker: \_\_\_\_\_ Broker's Telephone #: \_\_\_\_\_

**COMMENTS:** Please explain any special circumstances, or extraordinary factors that affected the purchase price, e.g., vacancy, seller motivation, conditions of sale, property condition, favorable seller financing, etc. Use this area for any other helpful information or comments.

\_\_\_\_\_  
\_\_\_\_\_

**ATTESTATION:**

I DO HEREBY DECLARE THAT THE FOREGOING INFORMATION, ACCORDING TO THE BEST OF MY KNOWLEDGE, MEMORY AND BELIEF, IS A COMPLETE AND TRUE STATEMENT OF ALL INCOME AND EXPENSES ATTRIBUTABLE TO THE ABOVE IDENTIFIED PROPERTY.

Signature: \_\_\_\_\_ Name (Print): \_\_\_\_\_ Date: \_\_\_\_\_

Title: \_\_\_\_\_ Telephone #: \_\_\_\_\_

When finished, please email this document plus any other supporting documentation (such as an audited financial statements) by clicking here: [mmrc@tylertech.com](mailto:mmrc@tylertech.com)