

INCOME AND EXPENSE ANALYSIS: HOTEL AND MOTEL

for Calendar year _____ or period beginning _____ / 01 / _____ and ending 12/31/ _____

PIN: OWNER'S NAME: PLACE NAME:	CONFIDENTIAL PER F.S. 195.027 Roger A. Suggs, CFA, AAS Clay County Property Appraiser Attn: Tom Marcy - Commercial Department P.O. Box 38 Green Cove Springs, FL 32043 (904) 284-6305 x 2266
--	---

PROPERTY NAME: _____

PROPERTY ADDRESS: _____

INCOME:

GROSS POSSIBLE RENTS @ 100% OCCUPANCY

	\$	\$	\$
(1) ROOMS	_____		
(2) FOOD	_____		
(3) BEVERAGE	_____		
(4) BANQUET AND CONVENTION	_____		
(5) TELEPHONE	_____		
(6) OTHER INCOME	_____		
(7) SUB TOTAL	=	_____	
(8) COMMISSIONS AND CONCESSIONS	_____		
(9) STORE RENTAL	_____		
(10) SUB TOTAL	=	_____	
(11) TOTAL INCOME FROM OPERATIONS		=	_____

COSTS OF GOODS SOLD & DEPARTMENTAL EXPENSES

(12) ROOMS'	_____		
(13) FOOD	_____		
(14) BEVERAGE	_____		
(15) BANQUET AND CONVENTION	_____		
(16) TELEPHONE	_____		
(17) OTHER DIRECT EXPENSE	_____		
(18) TOTAL COSTS AND EXPENSES	=	_____	
(19) GROSS OPERATING INCOME		=	_____

OPERATING EXPENSES

(20) FRANCHISE FEE			_____
ADMINISTRATIVE:			
ADMISTRATIVE & GENERAL	_____		
MANAGEMENT FEE	_____		
ADVERTISING AND SALES PROMOTION	_____		
PAYROLL & PAYROLL TAXES	_____		
OTHER ADMINISTRATIVE	_____		
(21) TOTAL ADMINISTRATIVE EXPENSES	=	_____	
UTILITIES:			
ELECTRICITY	_____		
WATER & SEWER	_____		
GAS	_____		
FUEL OIL	_____		
OTHER	_____		
(22) TOTAL UTILITIES EXPENSES	=	_____	
MAINTENANCE AND REPAIR:			
MAINT. & REPAIR PAYROLL	_____		
ELEC., PLUMBING, HVAC REPAIRS	_____		
EXTERIOR REPAIRS	_____		
PARKING LOT REPAIRS	_____		
ROOF REPAIRS	_____		
CONTRACT REPAIRS	_____		
MISC. MAINT. & REPAIRS	_____		
JANITORIAL	_____		
SUPPLIES	_____		
(23) TOTAL MAINT. AND REPAIR EXPENSES	=	_____	
SERVICES:			
TRASH REMOVAL	_____		
LANDSCAPE / LAWN SERVICE	_____		
SECURITY	_____		
PEST CONTROL	_____		
MISCELLANEOUS	_____		
(24) TOTAL SERVICES EXPENSES	=	_____	
(25) PROPERTY INSURANCE EXPENSE (1 YEAR)	=	_____	
(26) RESERVES FOR REPLACEMENT EXPENSE	=	_____	
(27) TOTAL OPERATING EXPENSES (TOTAL LINES (20) - (26))		=	_____
(28) TOTAL COSTS & EXPENSES (TOTAL LINE (18) & (27))		=	_____
(29) GROSS OPERATING PROFIT ((11) MINUS (28))		=	_____
(30) INTEREST EXPENSE CHARGED THIS PERIOD			_____
(31) DEPRECIATION EXPENSE CHARGED THIS PERIOD			_____
(32) PROPERTY TAX EXPENSE CHARGED THIS PERIOD			_____

ADDITIONAL INFORMATION

NUMBER OF AVAILABLE ROOMS _____ % OF OCCUPANCY _____

AVERAGE ROOM RATE _____ AGE OF PROPERTY _____

RESTAURANT- NUMBER OF SEATS	LOUNGE- NUMBER OF SEATS	BANQ. FACILITIES- NUMBER OF SEATS	CONVENTION ROOMS- SQUARE FEET TOTAL
_____	_____	_____	_____

NET RENTABLE AREAS

	NO. OF SQ. FT.	ANNUAL ASKING RENT PER SQ. FT.
RETAIL SPACE.....	_____	_____
OTHER (DESCRIBE _____).....	_____	_____

MORTGAGE INFORMATION

	1st MTG.	2nd MTG.	3rd MTG.
DATE	____/____	____/____	____/____
ORIGINAL AMOUNT.....	\$ _____	\$ _____	\$ _____
INTEREST RATE.....	_____%	_____%	_____%
TERM IN YEARS & MOS.....	____ & ____	____ & ____	____ & ____
PAYMENT (\$ per mo. semi, annual)..	\$ ____/____	\$ ____/____	\$ ____/____
BALLOON PAYMENT.....	\$ ____/____	\$ ____/____	\$ ____/____

IF THIS PROPERTY IS FOR SALE, ASKING PRICE: \$ _____ HOW LONG ON MARKET? _____

LISTING BROKER: _____ TELEPHONE: _____

PERSON PREPAIRING RETURN: _____

DATE: _____ TELEPHONE: _____

NAME OF TAX CONSULTANT OR ANYONE OTHER
THAN OWNER AUTHORIZED TO REPRESENT THIS
PROPERTY.

NAME _____
ADDRESS _____
PHONE _____