

**INCOME AND EXPENSE ANALYSIS: OFFICE BUILDINGS**

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

PIN:  OWNER'S NAME:  PLACE NAME:	<b>CONFIDENTIAL</b> PER F.S. 195.027 Roger A. Suggs, CFA, AAS Clay County Property Appraiser <b>Attn: Tom Marcy - Commercial Department</b> 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) OFFICES	_____		
(2) RETAIL	_____		
(3) WAREHOUSE	_____		
(4) OTHER RENTABLE AREAS	_____		
(5) GROSS POSSIBLE RENTAL INCOME	=	_____	
(6) VACANCIES AND RENT LOSS	_____		
(7) EFFECTIVE RENTAL INCOME	_____		
(8) OTHER INCOME:	_____		
COMMON AREA MAINTENANCE	_____		
INSURANCE	_____		
TAXES	_____		
TOTAL OTHER INCOME	=	_____	
(9) <b>TOTAL INCOME FROM OPERATIONS</b>		=	_____

**EXPENSES:**

<b>UTILITIES:</b>			
ELECTRICITY	_____		
WATER & SEWER	_____		
GAS	_____		
FUEL OIL	_____		
OTHER	_____		
(10) TOTAL UTILITIES	=	_____	
<b>JANITORIAL:</b>			
PAYROLL AND CONTRACTS	_____		
CLEANING SUPPLIES	_____		
MISCELLANEOUS	_____		
(11) TOTAL JANITORIAL	=	_____	
<b>MAINTENANCE AND REPAIR:</b>			
MAINT. & REPAIR PAYROLL	_____		
HVAC REPAIRS	_____		
ELEC. REPAIRS	_____		
PLUMBING REPAIRS	_____		
REPAIR CONTRACTS	_____		
EXTERIOR REPAIRS	_____		
ROOF REPAIRS	_____		
ELEVATOR REPAIRS	_____		
PARKING LOT REPAIRS	_____		
DECORATING-TENANT	_____		
DECORATING-PUBLIC	_____		
MISCELLANEOUS	_____		
(12) TOTAL MAINT. AND REPAIR	=	_____	
<b>ADMINISTRATIVE:</b>			
PAYROLL	_____		
ADVERTISING	_____		
ACCOUNTING AND LEGAL	_____		
LEASING COMMISSIONS	_____		
PROPERTY MANAGEMENT FEE	_____		
RENTAL TAX	_____		
OTHER COSTS	_____		
(13) TOTAL ADMINISTRATIVE	=	_____	
<b>OTHER PAYROLL COSTS:</b>			
PAYROLL	_____		
EMPLOYEE BENEFITS	_____		
(14) TOTAL OTHER PAYROLL	=	_____	
<b>SERVICES:</b>			
LANDSCAPE	_____		
TRASH REMOVAL	_____		
SECURITY	_____		
WINDOW WASHING	_____		
MISCELLANEOUS	_____		
(15) TOTAL SERVICES	=	_____	
(16) <b>PROPERTY INSURANCE (1 YEAR)</b>	=	_____	
(17) <b>RESERVES FOR REPLACEMENT</b>	=	_____	
(18) <b>TOTAL OPERATING COSTS</b>		=	_____

- (19) INTEREST EXPENSE \_\_\_\_\_
- (20) DEPRECIATION EXPENSE \_\_\_\_\_
- (21) PROPERTY TAX EXPENSE \_\_\_\_\_
- (22) GROUND RENT \_\_\_\_\_

**ADDITIONAL INFORMATION**

NUMBER OF STORIES: \_\_\_\_\_ NUMBER OF ELEVATORS: \_\_\_\_\_ YEAR BUILT: \_\_\_\_\_

**PLEASE FILL OUT PORTION BELOW OR ATTACH RENT ROLL**

RENT ROLL (as applicable)

TENANT NAME	LEASABLE SQ. FT.	BASE RENT PER SQ. FT.	CAM PER SQ. FT.	INSUR. PER SQ. FT.	TAXES PER SQ. FT.	TOTAL RENT PER SQ. FT.

NOTE: PLEASE LIST ALL TENANTS AND LEASABLE AREA, INCLUDING THOSE WHICH ARE OWNER OCCUPIED OR VACANT.

**MORTGAGE INFORMATION**

DATE \_\_\_\_\_  
 ORIGINAL AMOUNT \_\_\_\_\_  
 INTEREST RATE \_\_\_\_\_  
 TERM IN YEARS \_\_\_\_\_  
 PAYMENT \_\_\_\_\_

IF THIS PROPERTY IS FOR SALE, ASKING PRICE: \$ \_\_\_\_\_

LISTING BROKER: \_\_\_\_\_ TELEPHONE: \_\_\_\_\_

PERSON PREPARING RETURN: \_\_\_\_\_

DATE: \_\_\_\_\_ TELEPHONE: \_\_\_\_\_