

Office of the City Assessor 900 East Broad Street, Room 802 Richmond, Virginia 23219

Industrial Property

Income and Expense Survey for Calendar Year of _____ Information provided is CONFIDENTIAL, in accordance with Virginia Law

Map Reference	Property Address					
Form Preparer/Position						
I	Name		Position			
Telephone Number	Email Ad	dress	Date			
	If the return is prepared by any personal	on other than the owner, his / her declara	and statements) has been examined and is believed to ation is based on all the information relating to the			
<u>General Data</u>						
Business Name:						
Which of the following best de	escribes your property? (C	Theck one)				
Single Tenant Owner-user		Owner-user and tenant (s)				
Owner-user		Multi-tenant investment				
Other	(describe)					
Which of the following reflects	s the primary use of your p	property (Check one)				
Wareh	ouse/Distribution	Mini-Warehouse				
Manufacturing		Multi-bay, mixed-use				
	ch/Research/Development					
Other	(describe)					
Number of buildings						
One	Two	Three	More than three			
Gross Building Area (GBA):	square	feet				
Total Office Area:	square	feet				
Total Warehouse Area:	square	feet				
Total Other Area:	square	feet				
Total Rentable Area ¹ :	square	feet				
Parking Available:	# of sp	aces				
Typical Lease Structure (Please	e include a copy of a typic	al lease)				
Gross ²	Net ³	Absolute Net ⁴				

Total Leased Area:

¹ Total area included in tenant lease(s).

² Owner pays all expenses.

³ Owner pays only a few expenses; tenant (s) pays some expenses directly, such as utilities or interior maintenance.

⁴ Tenant pays for all expenses, including real-estate taxes and insurance.

(Industrial Property Cont'd)

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Annual Gross Income			
Gross Rental Income	square feet	\$	/ sq.ft. = \$
Other Income			\$
Total Gross Income			\$
Vacancy (Year End):	SF		
Annual Operating Expenses			
Real Estate Taxes			\$
Insurance			\$
Administrative/Legal/Accounting			\$
Repairs and Maintenance			\$
Trash/Snow Removal			\$
Management Fee			\$
Utilities			\$
Other:			\$
Other:			\$
Total Operating Expenses			\$

*Please identify any capital expenditures or extraordinary costs which vary from the typical operating expenses?

Please include your Income Summary, rent roll or use the one enclosed as a guide and typical lease. Attach comments and/or other information on a separate page, ie. IRS Schedule E Supplemental Income and Loss form, capital expenses, etc...

900 East Broad Street * Richmond, VA 23219 * 804.646.7500 * Fax 804.646.5686 * www.richmondgov.com

INDUSTRIAL PROPERTY TENANT RENT ROLL SUMMARY

Address	Tenant Name	Net Rentable Area	Annual Rent	Lease Term	Tenant Expenses Tax, Insurance Charges, etc.
				From:	
				To:	
				From :	
				То:	
				From:	
				To:	
				From:	
				To:	
				From:	
				To:	
				From:	
				To:	
				From:	
				To:	
				From:	
				То:	
			1	From:	
				To:	
				From:	
				То:	
				From:	
				To:	
			1	From:	
				To:	
			1	From:	
				To:	
			1	From:	
				To:	
				From:	
				To:	

* Extra Forms are available on our Website at: www.richmondgov.com/Assessor/forms.aspx. Please save and email this completed survey to asktheassessor@richmondgov.com.