



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

**Retail 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 \_\_\_\_\_  
 Name Position

Telephone Number \_\_\_\_\_ Email Address \_\_\_\_\_ Date \_\_\_\_\_

The preparer above declares under penalties provided by law, this return (including any accompanying schedules and statements) has been examined and is believed to be a true, correct and complete return. If the return is prepared by any person other than the owner, his / her declaration is based on all the information relating to the matters required to be reported in the return of which he/she has knowledge.

**General Description Information**

(Please check applicable category and complete the related questions.)

Property is totally owner-occupied Occupied Area \_\_\_\_\_ Sq.Ft.

Property is owner-occupied with Tenants  
 Total Building Area \_\_\_\_\_ Sq.Ft.  
 Owner-occupied Area \_\_\_\_\_ Sq.Ft.  
 Tenant-occupied Area \_\_\_\_\_ Sq.Ft.

Property is fully leased  
 Gross Leaseable Area (GLA) \_\_\_\_\_ Sq.Ft.  
 Gross Building Area \_\_\_\_\_ Sq.Ft.

Property is: Vacant Total Building Area \_\_\_\_\_ Sq.Ft.  
 Available for Sale Asking/List Price \$ \_\_\_\_\_  
 Available for Rent Asking Rent \$ \_\_\_\_\_  
 Holding for Future Use Please describe:  
 \_\_\_\_\_

# Units/Unit sizes \_\_\_\_\_ 0-500sf \_\_\_\_\_ 500-1,500sf \_\_\_\_\_ 1,500-3,000sf  
 \_\_\_\_\_ 3,000-5,000sf \_\_\_\_\_ 5,000-10,000sf \_\_\_\_\_ 10,000-20,000sf  
 \_\_\_\_\_ 20,000-50,000sf \_\_\_\_\_ >50,000sf

Parking Available: \_\_\_\_\_ (number of spaces)

Other Leased space: Cell Tower Date of Lease \_\_\_\_\_ Lease Amount \$ \_\_\_\_\_ per/year  
 Company Name: \_\_\_\_\_

**Annual Income**

Base Rental Income – Minimum \$ \_\_\_\_\_

Additional Rental Income – overages \$ \_\_\_\_\_

Parking Rental Income \$ \_\_\_\_\_

**Total Rent** \$ \_\_\_\_\_

**Other Income (Reimbursements from Tenants)**

Common Area Charges \$ \_\_\_\_\_

Property Tax Reimbursement \$ \_\_\_\_\_

Insurance Reimbursement \$ \_\_\_\_\_

Utility Charge Reimbursement \$ \_\_\_\_\_

**Total Operating Receipts** \$ \_\_\_\_\_

**Total Annual Income** \$ \_\_\_\_\_

**Vacancy & Collection Loss** \_\_\_\_\_ SF  
(Year End)

**Annual Operating Expenses**

	CAM* Expense	Paid By Landlord	Paid By Tenants
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Fixed Expenses

Real Estate Taxes \$ \_\_\_\_\_

Insurance \$ \_\_\_\_\_

Variable Expenses

Repair & Maintenance \$ \_\_\_\_\_

Parking Lot Maintenance \$ \_\_\_\_\_

Parking Rental Expense \$ \_\_\_\_\_

Utilities \$ \_\_\_\_\_

Trash Removal \$ \_\_\_\_\_

Security \$ \_\_\_\_\_

Advertising/Promotional \$ \_\_\_\_\_

Administrative Expenses \$ \_\_\_\_\_

Professional Services \$ \_\_\_\_\_

Management Fees \$ \_\_\_\_\_

Leasing Agent Fees \$ \_\_\_\_\_

Other: \_\_\_\_\_ \$ \_\_\_\_\_

Other: \_\_\_\_\_ \$ \_\_\_\_\_

**Total Operating Expenses** \$ \_\_\_\_\_

**Net Operating Income** \$ \_\_\_\_\_

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...

## OFFICE TENANT RENT ROLL SUMMARY

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

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