

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 Addres	Da	Date		
The preparer above declares under penalties lieved to be a true, correct and complete return, ating to the matters required to be reported in the	If the return is prepared by any	person other than the owner, his / he			
(Please ch		iption Information y and complete the relate	ed questions.)		
Property is totally owner-occupied		Occupied Area		Sq.Ft.	
Property is owner-occupied with	Tenants	Total Building Area Owner-occupied Area Tenant-occupied Area		_Sq.Ft.	
Property is fully leased		Gross Leaseable Area Gross Building Area	(GLA)		
Property is: Vacant		Total Building Area		_Sq.Ft.	
Available for Sale		Asking/List Price	\$	_	
Available for Ren	t	Asking Rent	\$	_	
Holding for Future	e Use	Please describe:			
	00-5,000sf	500-1,500sf 5,000-10,000sf >50,000sf	1,500-3,000sf		
Parking Available:	(number of spaces)				
Other Leased space: Cell Towe	r		Lease Amount \$		

Annual Income							
Base Rental Income – Minimum		\$		_			
Additional Rental Income – overage	ges	\$		_			
Parking Rental Income		\$		_			
Total Rent					\$ 		
Other Income (Reimbursements fr	om Te	nants)					
Common Area Charges		\$		_			
Property Tax Reimbursement		\$		_			
Insurance Reimbursement		\$		_			
Utility Charge Reimbursement		\$		_			
Total Operating Receipts	s				\$ 	_	
Total Annual Income						\$	
Vacancy & Collection Loss (Year End) Annual Operating Expenses			S	CAM* Expense	Paid By Landlord		Paid By Tenants
Fixed Expenses				Expense	Landioid		Tenants
Real Estate Taxes \$_			_				
Insurance \$_			_				
Leasing Agent Fees \$_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:	
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^{*}Extra Forms are available on our Website at: www.richmondgov.com/Assessor/forms.aspx. Please save and email this completed survey to IESurveyComm@rva.gov