

## Annual Income and Expense Report

## **RETURN TO:**

OFFICE OF THE ASSESSOR Town Hall 172 Main Street Killingly, CT 06239

TEL • 860-779-5323 FAX • 860-779-5338

ID:

Owner: Address: City/State/Zip:

Location:

<u>FILING INSTRUCTIONS</u> - The Assessor's Office is preparing for the revaluation of all real property located in Killingly. In order to fairly assess your real property, information regarding the property income and expenses is required. Connecticut General Statutes §12-63c requires all owners of rental real property to annually file this report. The information filed and furnished with this report will remain confidential in accordance with §12-63c(b), which provides that actual rental and operating expenses shall <u>not</u> be a public record and is <u>not</u> subject to the provisions of Section §1-210 (Freedom of Information).

Please complete and return the completed form to the Killingly Assessor's Office by on or before June 1, 2018. In accordance with Section §12-63c(d), of the Connecticut General Statutes, as amended, any owner of rental real property who fails to file this form or files an incomplete or false form with intent to defraud, shall be subject to a penalty assessment equal to a **Ten Percent** (10%) increase in the assessed value of such property.

GENERAL INSTRUCTIONS - Complete this form for all rented or leased commercial, retail, industrial or combination property. Identify the property and address. Provide Annual information for the Calendar Year 2017. TYPE/USE OF LEASED SPACE: Indicate use the leased space is being utilized for (i.e., office, retail, warehouse, restaurant, garage, etc.). ESC/CAM/OVERAGE: (Circle if applicable) ESCALATION: Amount, in dollars, of adjustment to base rent either pre-set or tied to the Inflation Index. CAM: Income received from common area charges to tenant for common area maintenance, or other income received from the common area property. OVERAGE: Additional fee or rental income. This is usually based on a percent of sales or income. PROPERTY EXPENSES & UTILITIES PAID BY TENANT: Indicate the property expenses & utilities the tenant is responsible for. Abbreviations may be used (i.e., "RE" for real estate taxes & "E" for electricity). VERIFICATION OF PURCHASE PRICE must be completed if the property was acquired on or after January 1, 2015.

<u>WHO SHOULD FILE</u> - All individuals and businesses receiving this form should complete and return this form to the Assessor's Office. If you believe that you are not required to fill out this form, please call the number listed above to discuss your special situation. All properties which are rented or leased, including commercial, retail, industrial and residential properties, except "such property used for residential purposes, containing not more than six dwelling units and in which the owner resides", <u>must</u> complete this form. If a property is partially rented and partially owner-occupied this report <u>must</u> be filed.

IF YOUR PROPERTY IS 100% OWNER-OCCUPIED, OR 100% LEASED TO A RELATED CORPORATION, BUSINESS, FAMILY MEMBER OR OTHER RELATED ENTITY, PLEASE INDICATE BY CHECKING THE FOLLOWING BOX  $\Box$ .

<u>HOW TO FILE</u> - Each summary page should reflect information for a single property for the year of 2017. If you own more than one rental property, a separate report/form must be filed for each property in this jurisdiction. An income and expense report summary page and the appropriate income schedule must be completed for each rental property. Income Schedule A must be filed for apartment rental property and Schedule B must be filed for all other rental properties. <u>All property owners must sign & return this form to the Killingly Assessor's Office on or before June 1, 2018..</u>

<u>A COMPUTER PRINT-OUT IS ACCEPTABLE AS LONG AS ALL THE REQUIRED INFORMATION IS PROVIDED.</u>

## SCHEDULE A – 2017 APARTMENT RENT SCHEDULE Complete this Section for Apartment Rental activity only. UNIT TYPE No. of Units ROOM COUNT MONTHLY RENT UNIT SIZE **TYPICAL** SQ. FT LEASE TERM BUILDING FEATURES INCLUDED IN **B**ATHS PER UNIT TOTAL TOTAL RENTED ROOMS RENT **EFFICIENCY** (Please Check All That Apply) 1 Bedroom ☐ Garbage Disposal □ Heat 2 Bedroom ☐ Furnished Unit ☐ Electricity 3 Bedroom 4 Bedroom ☐ Other Utilities ☐ Security OTHER RENTABLE UNITS ☐ Air Conditioning ☐ Pool OWNER/MANAGER/JANITOR OCCUPIED ☐ Tennis Courts ☐ Dishwasher SUBTOTAL ☐ Stove/Refrigerator GARAGE/PARKING ☐ Other Specify \_\_ OTHER INCOME (SPECIFY)

**TOTALS** 

SCHEDULE B - 2017 LESSEE RENT SCHEDULE				Complete this section for all other rental activities <u>except</u> apartment rental.						
NAME	LOCATION	Type/Use	LEASE TERM		RM	ANNUAL RENT			PROPERTY EXPENSES	
OF	OF	OF								& UTILITIES
TENANT	Leased	Leased	START	End	Leased	BASE	Esc/Cam/	TOTAL	RENT PER	PAID BY TENANT
	SPACE	SPACE	DATE	DATE	SQ. Ft.	RENT	OVERAGE	RENT	SQ. Ft.	
TOTAL										

## 2017 ANNUAL INCOME AND EXPENSE REPORT SUMMARY

O۱	vner:	Property Name:  Property Address:					
M	ailing Address:						
Ci	ty / State/ Zip:						
1.	Primary Property Use (Circle One) A. Apartment	B. Office	C. Retail	D. Mixed Use	E. Shopping Center	F. Industrial	G. Other
2.	Gross Building Area (Including Owner-Occupied Space)		Sq. Ft.		of Parking Spaces		<del></del>
3.	Net Leasable Area		Sq. Ft.	7. Actual Yo	ear Built		<del></del>
	Owner-Occupied Area		Sq. Ft.	8. Year Ren	nodeled		<del></del>
5.	No. of Units		<del></del>				
I	NCOME - 2017			EXPEN	NSES - 2017		
9.	Apartment Rental (From Schedule A)		<del></del>	21. Heating/A	Air Conditioning		
10.	Office Rentals (From Schedule B)		·	22. Electricit	у		·
11.	Retail Rentals (From Schedule B)		·	23. Other Uti	ilities		·
12.	Mixed Rentals (From Schedule B)			24. Payroll (B	Except management, repair & dec	corating)	·
13.	Shopping Center Rentals (From Schedule B)			25. Supplies			·
14.	Industrial Rentals (From Schedule B)		·	26. Managem	nent		·
15.	Other Rentals (From Schedule B)			27. Insurance	e		·
16.	Parking Rentals		<del></del> _	28. Common	Area Maintenance		<del></del>
17.	Other Property Income		<del></del> _	29. Leasing F	Fees/Commissions/Advert	ising	<del></del>
18.	TOTAL POTENTIAL INCOME (Add Line 9 Through Line 17)			30. Legal and	d Accounting		·
19.	Loss Due to Vacancy and Credit			31. Elevator	Maintenance		·
20.	<b>EFFECTIVE ANNUAL INCOME</b> (Line 18 Minus Line 19)			32. Security			·
				33. Other (Spe	ecify)		·
				34. Other (Spe	ecify)		·
				35. Other (Spe	ecify)		·
				36. Total E	EXPENSES (Add Lines 21 Thro	ough 35)	·
				37. <b>Net Ope</b>	ERATING INCOME (Line 20 M	Minus Line 36)	
				38. Capital E	Expenses		
				39. Real Esta	ate Taxes		
				40. Mortgage	e Payment (Principal and Inter	rest)	
				41. Depreciat	tion		
				42. Amortiza	ution		

RETURN TO THE ASSESSOR ON OR BEFORE JUNE 1, 2018 TO AVOID THE 10% PENALTY