

Official Request
**COMMERCIAL INCOME &
EXPENSE SURVEY**
CITY OF ALEXANDRIA
OFFICE OF REAL ESTATE ASSESSMENTS
703.746.4646



Tax Assessment Map # Abstract Code Account #

This form is accessible via the Office's website at
alexandriava.gov/realestate.

**If you wish, you may download the form and enter the data
via the fillable PDF and submit electronically.**

RETURN TO:

CITY OF ALEXANDRIA
OFFICE OF REAL ESTATE ASSESSMENTS
P.O. BOX 178
ALEXANDRIA, VIRGINIA 22313-1501

Dear Property Owner:

The Office of Real Estate Assessments is in the process of collecting and analyzing information for the annual reassessment of real estate located in the City of Alexandria. This is an official request pursuant to Section 58.1-3294 of the **Code of Virginia** that requires you to furnish this office with income and expense data for any income-producing properties for calendar year 2021. This request is also in compliance with Section 3-2-186 of the **Alexandria City Code**. All information submitted will be kept strictly confidential under the stipulations of Section 58.1-3 of the **Code of Virginia**.

This survey form is to be completed by the property owner or a duly authorized agent, showing the gross income (at 100% occupancy), vacancies and expenses for the above referenced property. The information should encompass the 2021 calendar year.

Income information related to calendar year 2021 that you may have previously submitted to the Office of Real Estate Assessments or to the Board of Equalization as part of a review or an appeal, **must be resubmitted at this time to satisfy this request.** In addition to the information requested as part of this survey, we request that you submit any other income or expense information that you believe to be relevant to the assessment of your property. The income information requested by the Department of Finance regarding business licenses is not associated with this request.

If the property is 100% owner occupied, and therefore not income producing, please state this in writing on the front of the form and return it to our office.

The enclosed self-addressed envelope is provided for your convenience. The income information must be returned to our office no later than **May 1, 2022** or postmarked by the U.S. Postal Service no later than **May 1, 2022**. We would like to remind you that any Request for Review of Assessment filed with this office, or any Appeal of Assessment filed with the Board of Equalization, which is based upon the income or expenses attributable to your property will not be considered unless this information has been filed on time.

If you have any questions regarding this matter or wish to discuss this request form with a member of our appraisal staff, please call between 8:00 a.m. and 5:00 p.m., Monday through Friday. Your cooperation and timely response to this legal requirement will be greatly appreciated.

Sincerely,

The Office of Real Estate Assessments

Enclosure

The Income and Expense information must be placed on this form. No alternative forms may be used. A detailed set of instructions is part of this survey. These instructions are provided to assist you in completing the form. If you should have any questions or need assistance please call our office at 703.746.4646.

CERTIFICATION

State law requires certification by the owners or officially authorized representative. (Please type or print all information except signatures.)

Name of Building _____

Property Address _____

Owner(s) name(s) _____

All information including the accompanying schedules and statements have been examined by me and to the best of my knowledge and belief are true, correct, and complete.

Management firm _____ Phone _____

Address _____

Date _____ Signature _____ Title _____

Print Name _____ E-mail _____

A. ANNUAL INCOME (Calendar Year 2021)

01	Rental Potential Income – Office Space	_____
02	Rental Potential Income – Stores, Shops, Banks, Restaurants, etc.	_____
03	Rental Potential Income – Basement or Storage Space	_____
04	Rental Potential Income – Parking	_____
05	Vacancy and Collection Loss	_____
06	Effective Gross Income (Sum Lines 1-4, then subtract Line 5)	_____
07	Real Property Tax escalation or reimbursement	_____
08	Reimbursements for Operating Expenses	_____
09	Reimbursements for Tenant Improvements	_____
10	Income from sale of Utilities or Services to tenants	_____
11	Miscellaneous Income – Specify	_____
12	TOTAL INCOME (Sum of Lines 6-11).....	_____

B. ANNUAL EXPENSES (Calendar Year 2021)**Utilities**

13	Electricity (excluding HVAC)	_____
14	HVAC (Fuel Type: _____)	_____
15	Combination Electricity for Power & HVAC (Do not fill in if lines 13 & 14 were used)	_____
16	Water/Sewer	_____
17	TOTAL	_____

Maintenance & Repair (excluding capital expenditures)

Maintenance & Repair Payroll (includes payroll taxes & benefits)		_____
18	Supplies	_____
19	HVAC repairs	_____
20	Electric/plumbing repairs	_____
21	Elevator repairs & maintenance contract	_____
22	Exterior repairs	_____
23	Roof repairs	_____
24	Parking lot & paving repairs	_____
25	Tenant Improvements (specify)	_____
26	Public area improvements	_____
27	Other repairs (specify)	_____
28	TOTAL	_____

Administrative

30	Administrative payroll (includes payroll taxes & benefits)	_____
31	Advertising	_____
32	Management fee	_____
33	Leasing fees (specify)	_____
34	Other administrative costs (specify)	_____
35	TOTAL	_____

Services

36	Janitorial contract or payroll (includes payroll taxes & benefits)	_____
37	Landscape contract or payroll (includes payroll taxes & benefits)	_____
38	Trash removal	_____
39	Security contract or payroll (includes payroll taxes & benefits)	_____
40	Window washing	_____
41	Snow removal	_____
42	Miscellaneous (specify)	_____
43	TOTAL	_____

Insurance & Taxes

44	Estimated 2022 Alexandria Stormwater Utility Fee	_____
45	Insurance (1 year only)	_____
46	Personal Property Taxes	_____
47	Real Estate Taxes	_____
48	TOTAL	_____

Other Expenses

49	Payments for Ground Rent	_____
50	Replacement reserves	_____
51	Other (identify)	_____
52	TOTAL	_____

53 TOTAL EXPENSES

(Sum of Lines 17, 29, 35, 43, 48, & 52).....

54 NET OPERATING INCOME

(Total Income less Total Expenses;
Line 12 minus Line 53)

Capital Expenditures

Have there been Capital Improvements or Capital Renovations to the property during this reporting period? ☐ Yes ☐ No

If yes, please provide total cost here and attach a detailed list on a separate page.

Reflect only those capital costs that were expensed in calendar year 2021.

Total Capital Costs _____

C. COST INFORMATION (applicable if property was built within last five years)

Estimated total development costs (includes all direct or "hard" costs plus all indirect or "soft" costs, including marketing costs, leasing commissions, etc. to achieve initial stabilized occupancy) \$ _____

Purchase price of land \$ _____

TOTAL COSTS \$ _____

NOTE: A detailed construction cost breakout report may be substituted in lieu of the above information.

D. SALES INFORMATION

Date Acquired _____ Price _____

Date Sold _____ Price _____

E. MISCELLANEOUS INFORMATION & CONCESSIONS

Is there a premium for: Elevation? ☐ Yes ☐ No View? ☐ Yes ☐ No Front & back? ☐ Yes ☐ No

Annual increases: Flat: _____%/year or _____% of CPI

Free rent ☐ Yes ☐ No Months free rent: _____

Moving allowance ☐ Yes ☐ No How much? _____

Cash allowance ☐ Yes ☐ No How much? _____

Parking charge ☐ Yes ☐ No How much? _____

Fix-up allowance ☐ Yes ☐ No How much? _____

F. VACANCY INFORMATION

Space vacant January 1, 2021 _____ sq. ft. rentable

Space vacant January 1, 2022 _____ sq. ft. rentable

Estimated income loss from vacancies in 2022 not compensated by lease: \$ _____

Actual loss of income in 2022 from bad accounts: \$ _____

Current market rent per sq. ft. for vacant space: \$ _____

G. TENANT INFORMATION

Please complete the enclosed Tenant Information Form (K) and/or submit a copy of the most up-to-date rent roll.

Responsibility for normal operating expenses: ☐ Owner ☐ Tenant

Responsibility for insurance & real estate taxes: ☐ Owner ☐ Tenant

Other provisions or modifications _____

Submit a copy of lease summary for all recently signed or executed leases (within the last two years) or a copy of the lease document if a summary is not available.

OWNER-OCCUPIED SPACE

If the owner or management occupies space on a rent-free basis, please identify the amount of space assigned and use:

Above grade retail space: _____ (sq. ft.)

Above grade office space: _____ (sq. ft.)

Below grade space: _____ (sq. ft.)

Total owner-occupied space: _____ (sq. ft.)

Has there been a professional appraisal on this real property in the last five years? ☐Yes ☐No

If yes, appraiser's estimate of value \$ _____ Date of value _____

Please identify each level as Basement, Mezzanine or Numbered Floor.

Level	Gross Sq. ft.	Gross Rentable Sq. ft.		Level	Gross Sq. ft.	Gross Rentable Sq. ft.

In lieu of the above, please include a copy of the most recent rent roll.

	Garage		Surface		Total Spaces
	Number	\$ / Mo.	Number	\$ / Mo.	
Parking spaces					
Loading spaces					