

Official Request



**COMMERCIAL INCOME &  
EXPENSE SURVEY**

CITY OF ALEXANDRIA  
DEPARTMENT OF REAL ESTATE ASSESSMENTS  
703.746.4646

Tax Assessment Map #      Abstract Code      Account #

--	--	--

**RETURN TO:**  
CITY OF ALEXANDRIA  
DEPARTMENT OF REAL ESTATE ASSESSMENTS  
P. O. BOX 178  
ALEXANDRIA, VIRGINIA 22313-1501

**Dear Property Owner:**

The Department 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 2011. 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 2011 calendar year.

Income information related to calendar year 2011 that you may have previously submitted to the Department 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 in regard to 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, 2012** or postmarked by the U.S. Postal Service no later than **May 1, 2012**. 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 Department 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. Contact person \_\_\_\_\_

Management Firm \_\_\_\_\_ Phone \_\_\_\_\_

Name (please print) \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_ Title \_\_\_\_\_

**A. ANNUAL INCOME (Calendar Year 2011)**

- 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** .....
- 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** .....

**B. ANNUAL EXPENSES (Calendar Year 2011)**

- |  |   |                 |  |
|--|---|-----------------|--|
| <b>Utilities</b>   |   | <b>Services</b> |  |
| 13 Electricity (excluding HVAC) .....                            | 36 Janitorial contract or janitorial payroll    |                 |  |
| 14 HVAC (Fuel Type: _____) .....                                 | (includes payroll taxes and benefits) .....     |                 |  |
| 15 Combination Electricity for Power & HVAC... ..                | 37 Landscape contract or landscape payroll      |                 |  |
| (Do not fill in if lines 13 & 14 were used)                      | (includes payroll taxes and benefits) .....     |                 |  |
| 16 Water/Sewer .....   | 38 Trash removal .....                          |                 |  |
| <b>17 TOTAL</b> .....  | 39 Security contract or security payroll        |                 |  |
|  | (includes payroll taxes and benefits) .....     |                 |  |
| <b>Maintenance &amp; Repair (excluding capital expenditures)</b> | 40 Window washing .....                         |                 |  |
| 18 Maintenance & Repair Payroll                                  | 41 Snow removal .....                           |                 |  |
| (includes payroll taxes and benefits) .....                      | 42 Miscellaneous (specify) .....                |                 |  |
| 19 Supplies .....  | <b>43 TOTAL</b> .....                           |                 |  |
| 20 HVAC repairs .....  |   |                 |  |
| 21 Electric/plumbing repairs .....                               | <b>Insurance and Taxes</b>                      |                 |  |
| 22 Elevator/repairs & maintenance contract .....                 | 44 Insurance (1 year only) .....                |                 |  |
| 23 Exterior repairs .....  | 45 Personal Property Taxes .....                |                 |  |
| 24 Roof repairs .....  | 46 Real Estate Taxes .....                      |                 |  |
| 25 Parking lot and paving repairs .....                          | <b>47 TOTAL</b> .....                           |                 |  |
| 26 Tenant Improvements (specify) .....                           |   |                 |  |
| 27 Public Area Improvements .....                                | <b>Other Expenses</b>                           |                 |  |
| 28 Other repairs (specify) .....                                 | 48 Payments for ground rent .....               |                 |  |
| <b>29 TOTAL</b> .....  | 49 Replacement reserves .....                   |                 |  |
|  | 50 Other (identify) .....                       |                 |  |
| <b>Administrative</b>  | <b>51 TOTAL</b> .....                           |                 |  |
| 30 Administrative payroll  | <b>52 TOTAL EXPENSES</b> .....                  |                 |  |
| (includes payroll taxes and benefits) .....                      |   |                 |  |
| 31 Advertising .....   |   |                 |  |
| 32 Management fee .....  | <b>54 NET OPERATING INCOME</b> (Effective Gross |                 |  |
| 33 Leasing fees (specify).....                                   | Income <b>less</b> Total Expenses) .....        |                 |  |
| 34 Other administrative costs (specify) .....                    |   |                 |  |
| <b>35 TOTAL</b> .....  |   |                 |  |

**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 separate page. **Reflect only those capital costs that were expensed in calendar year 2011.**

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, 2012 \_\_\_\_\_ sq. ft. rentable

Space vacant January 1, 2011 \_\_\_\_\_ sq. ft. rentable

Estimated income loss from vacancies in 2011 not compensated by lease: \$ \_\_\_\_\_

Actual loss of income in 2011 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.)

