



**STRATFORD
2010
ANNUAL INCOME
AND
EXPENSE REPORT**

RETURN TO:

ASSESSOR
Town of Stratford
2725 Main Street
Stratford, CT 06615

TEL • (203) 385-4025
FAX • (203) 385-4067

RE:

FILING INSTRUCTIONS: The Assessor's Office is preparing for revaluation of all real property located in Stratford. In order to assess your real property equitably, information regarding the property's 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 and is not open to public inspection.** Any information related to the actual rental and operating expenses shall not be a public record and is not subject to the provisions of Section 1-19 (Freedom of Information) of the Connecticut General Statutes.

Please complete and return the completed form to the Stratford Assessor's Office on or before June 1, 2011. In accordance with Section 12-63c (d), of the Connecticut General Statutes, as amended, any owner of 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. Any form returned incomplete will not be accepted and be subject to the 10 percent penalty. Any form received after June 1, 2011, will receive a 10% penalty on the October 1, 2011 Grand List.

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 2010.** **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. **PARKING:** Indicate number of parking spaces and annual rent for each tenant, include spaces or areas leased or rented to a tenant as a concession. **SPACES RENTED TWICE:** Those rented for daylight hours to one tenant and evening hours to another should be reported under each tenant's name. **OPTION PROVISIONS/BASE RENT INCREASE:** Indicate the percentage or increment and time period. **INTERIOR FINISH:** Indicate whether ownership of owner or tenant and the cost. Complete **VERIFICATION OF PURCHASE PRICE** information if purchased within the last twelve months.

WHO SHOULD FILE: All individuals and businesses receiving this form should complete and return this form to the Assessor's Office. 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*", must complete this form. If a non-residential property is partially rented and partially owner-occupied this report must be filed. If you have any questions, please call (203) 385-4025.

OWNER-OCCUPIED PROPERTIES: If your property is 100% owner-occupied, this form must be returned stating such. Please report only the income and expense items associated with occupancy of the building and land. Income and expense relating to your business should not be included.

HOW TO FILE: Each summary page should reflect information for a single property for the year of 2010. 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. A computer printout is acceptable for Schedules A and B, providing all the required information is provided.**

RETURN TO THE ASSESSOR ON OR BEFORE JUNE 1, 2011

Please return all pages of this form



SCHEDULE A - 2010 APARTMENT RENT SCHEDULE

Complete this Section for Apartment Rental activity only.

UNIT TYPE	NO. OF UNITS		ROOM COUNT		UNIT SIZE		MONTHLY RENT		TYPICAL LEASE TERM
	TOTAL	RENTED	ROOMS	BATHS	SQ. FT.	TOTAL	PER UNIT		
EFFICIENCY									
1 BEDROOM									
2 BEDROOM									
3 BEDROOM									
4 BEDROOM									
OTHER RENTABLE UNITS									
OWNER/MANAGER/JANITOR OCCUPIED									
SUBTOTAL									
GARAGE/PARKING									
OTHER INCOME (SPECIFY)									
TOTALS									

BUILDING FEATURES INCLUDED IN RENT
(Please Check All That Apply)

- Heat
- Electricity
- Other Utilities
- Air Conditioning
- Tennis Courts
- Stove/Refrigerator
- Other Specify _____
- Garbage Disposal
- Furnished Unit
- Security
- Pool
- Dishwasher

SCHEDULE B - 2010 LESSEE RENT SCHEDULE

Complete this section for all other rental activities except apartment rental.

NAME OF TENANT	LOCATION OF SPACE	LEASE TERM			ANNUAL RENT				PARKING			Interior Finish				
		START	END	SQ. FT.	BASE RENT	BASE YR OF LEASE	UTILITY CONTRIBUTION	ESC/CAM/OVERAGE	TOTAL RENT	TOTAL PER SQ FT	NO SPACES	ANNUAL RENT	OWN	TEN.	COST	
TOTAL																

Copy and Attach If Additional Pages are Needed (Schedule B must list all tenants)



2010 ANNUAL INCOME AND EXPENSE REPORT SUMMARY

Owner _____ Property Name _____
 Mailing Address _____ Property Address _____
 City / State / Zip _____ Parcel Id _____ (Fill in from the Front Instruction Page)

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.
 3. Net Leasable Area _____ Sq. Ft.
 4. Owner-Occupied Area _____ Sq. Ft.
 4a. 100% Owner Occupied _____ Yes Please Sign & Date the Last Page

INCOME - 2010

9. Apartment Rentals (From Schedule A) _____
 10. Office Rentals (From Schedule B) _____
 11. Retail Rentals (From Schedule B) _____
 12. Mixed Rentals (From Schedule B) _____
 13. Shopping Center Rentals (From Schedule B) _____
 14. Industrial Rentals (From Schedule B) _____
 15. Other Rentals (From Schedule B) _____
 16. Parking Rentals _____
 17. Other Property Income _____
 18. Reimbursement Income _____
 19. Utility Contributions _____
 20. **TOTAL POTENTIAL INCOME** _____
 21. Loss Due to Vacancy and Credit _____
 22. **EFFECTIVE ANNUAL INCOME** (Line 20 minus Line 21) _____
 23. Portion of Line 18 from Real estate taxes (if any) _____
 24. Effective Income Net of Tax reimbursements _____
 (Line 22 minus Line 23)

EXPENSES - 2010

25. Heating/Air Conditioning _____
 26. Electricity _____
 27. Other Utilities _____
 28. Payroll (Except management, repair & decorating) _____
 29. Supplies _____
 30. Management _____
 31. Insurance _____
 32. Common Area Maintenance _____
 33. Leasing Fees/Commissions/Advertising _____
 34. Legal and Accounting _____
 35. Elevator Maintenance _____
 36. General Repairs _____
 37. Other (Specify) _____
 38. Other (Specify) _____
 39. Other (Specify) _____
 40. Other (Specify) _____
 41. Security _____
 42. **TOTAL EXPENSES** (Add Lines 25 Through 41) _____
 43. **NET OPERATING INCOME** (Line 22 Minus Line 42) _____
 44. Capital Expenses _____
 45. Real Estate Taxes _____
 46. Mortgage Payment (Principle and Interest) _____

RETURN TO THE ASSESSOR ON OR BEFORE JUNE 1, 2011



VERIFICATION OF PURCHASE PRICE

PURCHASE PRICE \$ _____ DOWN PAYMENT \$ _____ DATE OF PURCHASE _____

Date of Last Appraisal _____ Appraisal Firm _____ Appraised Value _____
 FIRST MORTGAGE \$ _____ INTEREST RATE _____ % PAYMENT SCHEDULE TERM _____ YEARS
 SECOND MORTGAGE \$ _____ INTEREST RATE _____ % PAYMENT SCHEDULE TERM _____ YEARS
 OTHER \$ _____ INTEREST RATE _____ % PAYMENT SCHEDULE TERM _____ YEARS
 CHATTEL MORTGAGE \$ _____ INTEREST RATE _____ % PAYMENT SCHEDULE TERM _____ YEARS

(Check One)	
Fixed	Variable

DID THE PURCHASE PRICE INCLUDE A PAYMENT FOR: Furniture? \$ _____ (VALUE) EQUIPMENT? \$ _____ (VALUE) OTHER (SPECIFY) \$ _____ (VALUE)

HAS THE PROPERTY BEEN LISTED FOR SALE SINCE YOUR PURCHASE? (CIRCLE ONE) YES NO

IF YES, LIST THE ASKING PRICE \$ _____ DATE LISTED _____ BROKER _____

Remarks - Please explain any special circumstances or reasons concerning your purchase (i.e., vacancy, conditions of sale, etc.) _____

I DO HEREBY DECLARE UNDER PENALTIES OF FALSE STATEMENT THAT THE FOREGOING INFORMATION, ACCORDING TO THE BEST OF MY KNOWLEDGE, REMEMBRANCE AND BELIEF, IS A COMPLETE AND TRUE STATEMENT OF ALL THE INCOME AND EXPENSES ATTRIBUTABLE TO THE ABOVE IDENTIFIED PROPERTY (Section 12-63c (d) of the Connecticut General Statutes).

SIGNATURE _____ NAME (Print) _____ DATE _____
 TITLE _____ TELEPHONE _____

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