



April 14, 2010

RE: Income and Expense Statement

Dear Property Owner:

The Assessor's Office is required by law to revalue all property within the Town of Stratford every five (5) years. In order to assess your real property fairly and equitably, information regarding the income and expense related to your property is essential. Connecticut General Statutes, Section 12-63c, requires all owners of rental property to annually file the enclosed form. This year's filing of income and expense data is for the 2009 calendar year. Please read the instructions located on the front of the form for information and assistance in completing the form.

If you are 100% owner occupied and no consideration is transacted between the business entity and the real estate entity please fill in the top portion of page 3 and check off yes under 4a, sign the last page and return the documents no later than June 1, 2010.

All information filed and furnished with the enclosed form will remain confidential and is not open to public inspection. Any information related to the actual rental, rental related income and operation 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.

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, 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.

Please sign and return the completed form to the Stratford Assessor's Office on or before June 1st, 2010. If you have questions concerning these forms or the information required, please call the Assessor's Office at 203-385-4025.

Sincerely,
Melinda Fonda
Assessor



STRATFORD 2009 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, 2010. 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, 2010, will receive a 10% penalty on the October 1, 2010 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 2009.** **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 2009. 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, 2010

Please return all pages of this form



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SCHEDULE A - 2009 APARTMENT RENT SCHEDULE

Complete this Section for Apartment Rental activity only.

UNIT TYPE	NO. OF UNITS		ROOM COUNT		UNIT SIZE	MONTHLY RENT		TYPICAL
	TOTAL	RENTED	ROOMS	BATHS	SQ. FT.	PER UNIT	TOTAL	LEASE TERM
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 – 2009 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**)



2009 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
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

- D. Mixed Use E. Shopping Center F. Industrial G. Other _____
5. No. of Units _____
6. Number of Parking Spaces _____
7. Actual Year Built _____
8. Year Remodeled _____

INCOME - 2009

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 - 2009

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, 2010



VERIFICATION OF PURCHASE PRICE

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

Date of Last Appraisal _____	Appraisal Firm _____	Appraised Value _____	(Check One)
			Fixed Variable
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	

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 _____

RETURN TO THE ASSESSOR ON OR BEFORE JUNE 1, 2010

