

# Assessor's Office City of Woburn

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M B L U:	OWNER / AUTHORIZED AGENT:	
LOCATION:	PHONE:	
CLASS:	SIGNATURE (Required):	

## FY 2016 INCOME AND EXPENSE STATEMENT for year ending 12/31/2014

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### REVENUE: {These items are paid by Tenants – NOT by Owner}

Contract Rent *1	
Percentage Rent *2	
Expense Escalation	
Utilities	
Real Estate Taxes	
Parking Income	
Cell Tower Income	
Other Income	

\*1 Amount charged if there was no Vacancy.

\*2 Used in retail operations where a % of the gross is paid as part of the rent.

### Please check **ONE** of the following:

- A. Completely Owner Occupied
- B. Partially ( \_\_\_\_\_ %) Owner Occupied
- C. Completely Tenant Occupied

NOTE: If the property is completely Owner Occupied, then omit the "Revenue" section and fill out the "Expenses" section.

Gross Income: \_\_\_\_\_  
 Less **Actual** Vacancy \_\_\_\_\_  
 Effective Gross Income \_\_\_\_\_

→ **Do Not** Enter any amount other than **ACTUAL Vacancy**

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### OPERATING EXPENSES: {Items paid by Owner Only}

Heat	<i>Only Include</i>		
Electric	<i>Monies that</i>		
Water & Sewer	<i>have actually</i>		
Maintenance	<i>been paid out</i>		
Insurance			
Trash Removal			
Snow Removal			
Accounting			
Management			
Reserves			
Other			

Please circle type:  
Oil Gas Elec.

List the cost for each item in the blocks below. **Do Not include** any of these items as "Operating Expenses":

- Real Estate Taxes
- Mortgage Related Costs including Interest
- Depreciation
- Any cost **not** related to the operation of the Real Estate – Including cost associated with a business located at the site.

Total Operating Expenses:

Net Operating Income:

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 Comments or Clarification: \_\_\_\_\_

5 Capital Improvements:	Type	Cost