



## 2022 Property Income and Expense Questionnaire OFFICE / RETAIL / INDUSTRIAL PROPERTY TYPES

\*Information for year ending December 31, 2020\*

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### GENERAL ACCOUNT INFORMATION (please provide the following data from your Income and Expense request letter)

Assessment Account Identifier (eg 01234567-54-0306)	PARID - JUR - LUC
Property Location	LOCATION
Owner	OWN1 OWN2
Corporate Email Address	

### BUILDING INFORMATION

Building Name	Occupied Area		0
Year Built	Vacant Area		0
Year Renovated	Total Area		0
Number of Stories	Construction Type		
Warehouse Story Height			(Wood, Concrete/Masonry, Steel)

### FINANCIAL INFORMATION for fiscal period ending (DD/MM/YYYY):

#### REVENUE COLLECTED

Office Rental Income	
Retail Rental Income	
Warehouse Rental Income	
Apartment Rental Income	
Parking Rental Income	
Antenna / Telecommunications Income	
Recovery Income	
Overage / Percent rent	
Government Assistance Income	
Other Income (please specify)	
<b>Total Gross Income Collected</b>	<b>0.00</b>

#### INCOME LOSS due to VACANCY

#### INCOME LOSS due to BAD DEBT

Apartments	Apartments
Retail Tenants: Anchor	Retail Tenants: Anchor
Retail Tenants: Ancillary	Retail Tenants: Ancillary
Office Tenants	Office Tenants
Warehouse Tenants	Warehouse Tenants
COVID-19 Related	Bad Debt related to COVID-19
	Deferrals related to COVID-19

#### Return ALL PAGES to PVSC by email, mail and/or fax:

#### Contact PVSC regarding any questions or information at:

Email:	<a href="mailto:inquiry@pvsc.ca">inquiry@pvsc.ca</a>	Phone:	1-800-380-7775 (Within North America)
Fax:	1-888-339-4555 (Within North America) 1-902-893-6101 (Outside North America)		1-902-893-5800 (Outside North America)
Mail:	Suite 6, 15 Arlington Place Truro, NS B2N 0G9	Website:	<a href="http://www.pvsc.ca">www.pvsc.ca</a>

#### \*\*\*OFFICE USE ONLY\*\*\*

Date Received:	Date Scanned:	Date Logged:	Date Input:



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<b>Please provide your Assessment Account Identifier, as entered on Page 1:</b>	PARID - JUR - LUC
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OPERATING EXPENSES (Report for 12 months)	NON-RECOVERABLE (not due to vacancy)	RECOVERABLE
Management		
Administration		
Utilities: Electricity		
Heat (non-electric)		
Water and Sewer		
HVAC		
Janitorial / Cleaning		
Waste Removal		
Repairs and Maintenance		
Elevator / Escalator Maintenance		
Grounds, Parking & Snow Removal		
Security		
Professional Fees - Legal & Audit		
Property Insurance (12 months)		
Advertising		
Leasing Commissions		
Leasing Incentives & Inducements		
Travel / Vehicle		
Additional COVID-19 Related Expenses (please specify):		
Other (please specify):		
<b>Total Operating Expenses (excluding taxes)</b>	<b>0.00</b>	<b>0.00</b>

<b>Property Taxes</b>		
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<b>NET OPERATING INCOME (before Depreciation and Debt Service)</b>	
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Identify Major Renovations or Capital Expenditures			
Have there been Capital Improvements or Capital Renovations completed during this reporting period? If yes, please specify below.		Yes [ <input type="checkbox"/> ]	No [ <input type="checkbox"/> ]
Item 1:		Associated Cost:	
Item 2:		Associated Cost:	
Please attach a detailed list if space provided is insufficient		Total Capital Cost:	0.00

**CERTIFICATION: As per my signature below, I certify that all information, accompanying schedules and statements have been reviewed by me and to the best of my knowledge and belief are true, correct and complete.**

<b>Name (Please Print)</b>	<b>Position</b>	<b>I am:</b>
		[ <input type="checkbox"/> ] Owner / Employee [ <input type="checkbox"/> ] Agent / Management Company
<b>Signature / Email of Signatory</b>	<b>Phone</b>	<b>Date</b>

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TOTAL ACTUAL RECOVERABLE EXPENSES (CAM)	Area (SF)	Operating Expenses (PSF)	Property Taxes (PSF)
Retail Tenants: Anchor			
Retail Tenants: Ancillary			
Office Tenants			
Warehouse Tenants			
Food Court Tenants			
Free Standing Units			

MONTHLY PARKING and STORAGE INFORMATION		
Type	Number of Spaces / Units	Rate Per Space / Unit
On-site Indoor Parking		
On-site Outdoor Parking		
On-site Storage Units		

**COMMERCIAL RENTAL INFORMATION**

TENANT TYPE	LOCATION		TENANT NAME OR VACANT	LEASE START DATE DD/MM/YYYY	LEASE END DATE DD/MM/YYYY	AREA OCCUPIED (SF)	AREA VACANT (SF)	CONTRACT RENT (PSF)	OVERAGE OR PERCENT RENT (PSF)	EXPENSES INCLUDED IN RENT (PSF)	RECOVERY INCOME / CAM (PSF) COLLECTED		TOTAL CHARGES (PSF)	MARKET RENT (PSF) FOR VACANT SPACE
	FLOOR	SUITE #									OPERATING EXPENSES	PROPERTY TAX EXPENSE		
OFFICE [O] RETAIL [R] WAREHOUSE (W) STORAGE [S]			Must include all owner occupied space							Report for "Gross"/ "Semi-Gross" or "Base Year" leases only			Total revenue PSF received from tenant	Please provide asking rent on vacant area; if gross rent indicate with an asterisk (*)
								(A)	(B)		(C)	(D)	=(A + B + C + D)	0.00
														0.00
														0.00
														0.00
														0.00
														0.00
														0.00
														0.00
														0.00
														0.00

**DO NOT ENTER IN THIS ROW / PVSC USE ONLY**

AREA TOTALS	0	0
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**APARTMENT RENTAL INFORMATION (if applicable)**

INFORMATION MUST BE REPORTED FOR THE ENTIRE PROPERTY INCLUDING VACANT UNITS						INCLUDED IN RENT							
Unit Type	# of Units	Number of Baths in Unit		Average Monthly Rent	Size of Typical Unit (SF)	Heat	Electricity	Washer/Dryer		Dishwasher	Microwave	Cable	Furniture
		Full	Half					In Unit	Shared				
Sample One Bedroom	25	1	1	\$725		√	√		√	√		√	
Bachelor													
One													
One + Den													
Two													
Two + Den													
Three													
Three + Den													
Other (specify below)													
Other detail:													

**Use the area below to report on the Superintendent or Model Unit, if applicable - DO NOT INCLUDE IN UNITS REPORTED ABOVE**

Unit Type	# of Units	# Bedrooms	# Baths	Market Monthly Rent	Size of Typical Unit (SF)	Heat	Electricity	Washer/Dryer		Dishwasher	Microwave	Cable	Furniture
								In Unit	Shared				
* Superintendent/ Model													
TOTAL UNITS	0												

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