2028 Property Income and Expense Questionnaire PARKADE PROPERTIES

Information for year ending December 31, 2026

GENERAL ACCOUNT INFORMATION (please provide the following data from your Income and Expense request letter)	
Assessment Account Identifier (eg. 01234567-54-0706)	
Property Location	
Owner	
Corporate Email Address	

BUILDING INFORMATION			
Parkade Name		Year Built	
Year Renovated		Number of Levels	
Number of Outdoor Spaces		Monthly Rate for Outdoor Space	
Number of Indoor Spaces		Monthly Rate for Indoor Space	
Number of On-site Storage Units		Monthly Rate for Storage Units	

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

REVENUE COLLECTED	
Parking Rental Income	
Commercial Rental Income (if applicable, please complete page 3)	
Recovery Income	
Other Income (please specify)	
Total Gross Income	

Return ALL PAGES to PVSC by email or mail:		Contact PVSC regarding any questions or information at:	
Email:	inquiry@pvsc.ca	Phone:	1-800-380-7775 (Within North America) 1-902-893-5800 (Outside North America)
Mail:	Suite 6, 15 Arlington Place Truro, NS B2N 0G9	Website	www.pvsc.ca
Note: As of January 1, 2027, PVSC no longer accepts or sends documents by fax.			

OFFICE USE ONLY			
Date Received:	Date Scanned:	Date Logged:	Date Input:

2028 Property Income and Expense Questionnaire
PARKADE PROPERTIES

Information for year ending December 31, 2026

Please provide your Assessment Account Identifier, as entered on Page 1:	

OPERATING EXPENSES	NON-RECOVERABLE (not due to vacancy)	RECOVERABLE
Management		
Administration		
Utilities: Electricity		
Heat		
Water and Sewer		
HVAC		
Waste Removal		
Repairs & Maintenance: General		
Structural		
Security		
Professional Fees - Legal & Audit		
Property Insurance (12 months)		
TOTAL OPERATING EXPENSES (excluding property taxes)		

NET OPERATING INCOME (before Depreciation, Debt Service and Realty Taxes)	

Property Taxes		

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 [ ]	No [ ]
Item 1:		Associated Cost:	
Item 2:		Associated Cost:	
Please attach a detailed list if space provided is insufficient		Total Capital Cost:	

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.

Name (Please Print)	**Position**	**I am:** [ ] Owner / Employee [ ] Agent / Management Company
Signature	**Phone**	**Date**
Email of Signatory		

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Property Valuation Services Corporation

2028 Property Income and Expense Questionnaire
PARKADE PROPERTY TYPES

Information for year ending December 31, 2026

Please provide your Assessment Account Identifier, as entered on Page 1:

TOTAL ACTUAL RECOVERABLE EXPENSES (CAM)	Area (SF)	Operating Expenses (PSF)	Property Taxes (PSF)
Retail Tenant			
Office Tenants			
Warehouse Tenants			

COMMERCIAL RENTAL INFORMATION (if applicable)

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					For step-up or renewal leases indicate rent payable as of relevant year end. (A)	(B)	Report for "Gross"/ "Semi-Gross" or "Base Year" leases only	(C)	(D)	Total revenue PSF received from tenant (=A + B + C + D)	Please provide asking rent on vacant area; if gross rent indicate with an asterisk (*)
DO NOT ENTER IN THIS ROW / PVSC USE ONLY														
			AREA TOTALS			0	0							

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