

## 2024 Property Income and Expense Questionnaire PARKADE PROPERTIES

\*Information for year ending December 31, 2022\* Page 1 of 3

GENERAL ACCOUNT INFORMATION (please provide the following data from your Income and Expense request letter)								
Assessment Account Identifier (eg	j. 01234567-54-0706)	PARID - JUR - LUC						
Property Location		LOCATION						
Owner		IWO	OWN1 OWN2					
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 fo	r fiscal period ending (DD/MM/YYYY)	)						
REVENUE COLLECTED								
Parking Rental Income								
Commercial Rental Income (if applica	able, please complete page 3)							
Recovery Income			-					
Government Assistance Income								
Other Income (please specify)								
Total Gross Income			0.00					
Return ALL PAGES to F	PVSC by email, mail and/or fax:	Contact PVSC regarding a	ny questions or information at:					
Email:	inquiry@pvsc.ca	Dhamai	1-800-380-7775 (Within North America)					
Fax:	1-888-339-4555 (Within North America)	- Phone:	1-902-893-5800 (Outside North America)					
Fax.	1-902-893-6101 (Outside North America)							
Mail:	Suite 6, 15 Arlington Place Truro, NS B2N 0G9	Website	www.pvsc.ca					

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



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

PARID - JUR - LUC

OPERATING EXPENSES	NON-RECOVE (not due to va		RECOVERABLE		
Management			3,		
Administration					
Utilities: Electricity					
Heat					
Water and Sewer					
HVAC					
Waste Removal					
Repairs & Maintenance: General					
Structural					
Security					
Professional Fees - Legal & Audit					
Property Insurance (12 months)					
Additional COVID-19 Related Expenses (please	e specify)				
TOTAL OPERATING EXPENSES (excluding p	property taxes)		0.00		0.00
NET OPERATING INCOME (before Depreciation, Debt Service and Realt					
Property Taxes					
Identify Major Renovations or Capital	Expenditures				
Have there been Capital Improvements or Capi yes, please specify below.	ng this reporting period? If	Yes [ ]	No [ ]		
Item 1:			Associated Cost:		
Item 2:		Associated Cost:			
Please attach a detailed list if space provided is		Total Capital Cost:		0.00	
CERTIFICATION: As per my signature and to the best of my knowledge and b			ng schedules and	statements have been reviewed b	y me
Name (Please Print)		Position		I am: [ ] Owner / Employee [ ] Agent / Management Company	
Signature		Phone		Date	
Email of Signator	ry				
Return ALL PAGES to PVSC by en	nail, mail and/or fax:	Contact PVS	C regarding any	questions or information at:	
Email: inc	quiry@pvsc.ca	Phone:	1-800-	380-7775 (Within North America)	
1-888-339-455 Fax:	55 (Within North America)	1 1010.	1-902-8	893-5800 (Outside North America)	
1-902-893-610	01 (Outside North America) , 15 Arlington Place	Website	www.pvsc.ca		



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

## 2024 Property Income and Expense Questionnaire

## PARKADE PROPERTY TYPES

\*Information for year ending December 31, 2022\*

PARID - JUR - LUC

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

TENANT TYPE	LOCATION			LEASE START	LEASE END	AREA OCCUPIED (SF)	AREA VACANT (SF)	RENT PERCEN	OVERAGE OR	EXPENSES	RECOVERY INCOME / CAM (PSF) COLLECTED			MARKET RENT
	FLOOR	SUITE #	TENANT NAME OR VACANT	DATE DATE DD/MM/YYYY DD/MM/YYYY	PERCENT RENT (PSF)				INCLUDED IN RENT (PSF)	OPERATING EXPENSES	PROPERTY TAX EXPENSE	TOTAL CHARGES (PSF)	(PSF) FOR VACANT SPA	
OFFICE [O] RETAIL [R] VAREHOUSE (W) STORAGE [S]			Must include all owner occupied space					For step-up or renewal leases indicate rent payable as of relevant year end.		Report for "Gross"/ "Semi-Gross" or "Base Year" leases only			Total revenue PSF received from tenant	Please provi asking rent of vacant area gross rent indicate with asterisk (*)
								(A)	(B)		(C)	(D)	(=A + B + C + D)	uotonok (
													0.00	
													0.00	
													0.00	
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													0.00	
													0.00	
													0.00	
													0.00	

AREA TOTALS 0

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Request for Information by Property Valuation Services Corporation under Section 20 of the Nova Scotia Assessment Act

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