

2020 ANNUAL INCOME AND EXPENSE REPORT SUMMARY

Filing instructions are on page 4

Owner Name _____
 Mailing Address _____
 (if different from property address)
 City/State/Zip _____

Property Address: _____

PID # _____

1 Primary Property Use (Check One)

Apartment
 Office
 Retail
 Mixed Use
 Shopping Ctr.
 Industrial
 Other _____

2 Gross Building Area

(Including Owner-Occupied Space)

Sq. Ft.

6 Number of Parking Spaces

3 Net Leasable Area

Sq. Ft.

7 Actual Year Built

4 Owner-Occupied Area

Percentage area reporting acceptable

Sq. Ft. or %

8 Year Remodeled

5 Number Of Units

INCOME

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 TOTAL POTENTIAL INCOME

(Add Line 9 Through Line 17)

19 Loss Due to Vacancy and Credit

20 EFFECTIVE ANNUAL INCOME

(Line 18 Minus Line 19)

EXPENSES

List property owner dollar amount only. Indicate "net" in place of tenant responsible payments.

21 Heating: (Gas, Oil)

22 Electricity: (Operations, Heat and Cooling)

23 Other Utilities: (Water & Sewer)

24 Building Payroll (Except management)

25 Maintenance/Repairs: (Upgrades)

26 Insurance

27 Trash Removal

28 Snow Removal/Landscaping

29 Legal and Accounting

30 Management

31 Reserve For Replacements

32 Tenant / Leasehold Improvements

33 Elevator Maintenance

34 Other (Specify) _____

35 Other (Specify) _____

36 Other (Specify) _____

37 Security

38 TOTAL EXPENSES (Add Lines 21 Through 37)

39 NET OPERATING INCOME (Line 20 Minus Line 38)

40 Capital Expenses

41 Real Estate Taxes

42 Mortgage Payment (Principal and Interest)

RETURN TO THE ASSESSOR ON OR BEFORE JUNE 1, 2021

SCHEDULE A - 2020 APARTMENT RENT SCHEDULE

Complete this Section for APARTMENT Rental activity only.

UNIT TYPE	NO. OF UNITS per Type		ROOM COUNT per Type		UNIT SIZE	MONTHLY RENT		ANNUAL RENT	Property Address
	TOTAL	# RENTED	Total ROOMS	# BATHS	@ Per unit TOTAL SQ. FT.	PER UNIT per month	TOTAL per Unit type per month	Gross Annual Rent per unit type	
EFFICIENCY									<p style="text-align: center;">BUILDING FEATURES INCLUDED IN RENT</p> <p style="text-align: center;">(Please Check All That Apply)</p> <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <input type="checkbox"/> Heat <input type="checkbox"/> Electricity <input type="checkbox"/> Other Utilities <input type="checkbox"/> Air Conditioning <input type="checkbox"/> Stove/Refrigerator <input type="checkbox"/> Dishwasher <input type="checkbox"/> Garbage Disposal <input type="checkbox"/> Other Specify _____ </div> <div style="width: 45%;"> <input type="checkbox"/> Furnished Unit <input type="checkbox"/> Security <input type="checkbox"/> Pool <input type="checkbox"/> Tennis Courts <input type="checkbox"/> Parking </div> </div>
1 BEDROOM									
2 BEDROOM									
3 BEDROOM									
4 BEDROOM									
OTHER RENTABLE UNITS									
OWNER/MANAGER/JANITOR OCCUPIED									
SUBTOTAL									
GARAGE/PARKING									
OTHER INCOME (SPECIFY, i.e: Laundry)									
TOTALS									

SCHEDULE B - ALL OTHER 2020 TENANT LESSEE SCHEDULE

Complete this Section for ALL OTHER rental activities except apartment rental.

NAME OF TENANT	LOCATION OF SPACE Ex. (Bsmnt, 1st Flr, 2nd Flr...)	LEASE TERM			ANNUAL RENT				PARKING		SEGREGATED COST (BUILD OUT / INTERIOR FINISH)		
		START Mo/Yr	END Mo/Yr	SQ.FT	BASE TOTAL	ESC/CAM OVERAGE	TOTAL	TOTAL \$ PER SQ. FT.	NO. OF SPACES	ANNUAL RENT	OWNER COST	TENANT COST	COST TOTAL
TOTALS													

COPY AND ATTACH IF ADDITIONAL PAGES ARE NEEDED

PLEASE SUBMIT A SINGLE REPORT FOR EACH LETTER RECEIVED. A 10% PENALTY WILL BE ASSESSED FOR MULTIPLE PARCEL REPORT SUBMISSIONS.

VERIFICATION OF PURCHASE PRICE

Property Address _____ **PID #** _____
PURCHASE PRICE \$ _____ **DOWN PAYMENT** \$ _____ **DATE OF PURCHASE** _____
DATE OF LAST APPRAISAL _____ **APPRAISAL FIRM** _____ **APPRAISED VALUE** _____

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

(Check One)

FIXED	VARIABLE

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? (Check 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 _____ **Date:** _____ **PRINT NAME:** _____
E Mail Address _____ **TELEPHONE** _____ **TITLE** _____



CITY OF BRISTOL

2020 ANNUAL

INCOME AND EXPENSE REPORT

FILING INSTRUCTIONS

RETURN TO:

Thomas DeNoto, Assessor
111 North Main Street
Bristol, CT 06010
(P) 860-584-6245
thomasdenoto@bristolct.gov

PLEASE SUBMIT A SINGLE REPORT FOR EACH LETTER RECEIVED.

A 10% PENALTY WILL BE ASSESSED FOR MULTIPLE PARCEL REPORT SUBMISSIONS.

FILING INSTRUCTIONS. The Assessor's Office is preparing for revaluation of all real property. In order to assess your real property equitably, information regarding the property income and expenses is required. Connecticut General Statute 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 1-210 (Freedom of Information) of the Connecticut General Statutes.

Please complete and return the completed form to the Assessor's Office on or before June 1, 2021.

(emailed submissions are encouraged to: thomasdenoto@bristolct.gov)

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 report or files an incomplete or false report 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. In accordance with CGS, Sec 12-63b, as amended, upon determination that there is good cause, the assessor may grant an extension if the owner of such property files a request for an extension with the assessor not later than June first.**

GENERAL INSTRUCTIONS. Complete this form for all rented or leased commercial, retail, industrial or combination property. Identify the property address and PID number provided in your letter. **Provide Annual information for the calendar year 2020.** **ESC/CAM/OVERAGE:** (Check 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 for the common area property. **OVERAGE:** Additional fee of 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 completed by the owner or the tenant and the cost. Complete **VERIFICATION OF PURCHASE PRICE** information.

WHO SHOULD FILE. All individuals and businesses receiving this form should complete and return this form to the Assessor's Office. All properties that 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 the Assessor's Office.

OWNER OCCUPIED PROPERTIES. **If your property is 100% owner-occupied, please indicate 100% on line 4 of page one of the report and complete verification page 3 of the report.** Reported real estate expense items are encouraged in association with owner occupancy. Income and expense relating to your business should not be reported.

HOW TO FILE. Each summary page should reflect information for a single property for the year 2020. **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 Schedule A and B, providing all the required information is provided. **PLEASE SUBMIT A SINGLE REPORT FOR EACH LETTER RECEIVED. A 10% PENALTY WILL BE ASSESSED FOR MULTIPLE PARCEL REPORT SUBMISSIONS.**

RETURN TO THE ASSESSOR ON OR BEFORE JUNE 1, 2021