

BEACH & COMPANY

Professional Real Estate Appraisal Services

Information needed to complete the operating income statement

Indicate Unit number or address		1	2	3	4
Actual rent collected today for each unit Lease / Mo-Mo ?		\$	\$	\$	\$
Homeowners Insurance per year		\$			

Operating expenses and Utilities owner or tenant / Per mth/Yr	Paid by:	Owner	Tenant	Included in Tax or other
Propane	Yr or Mth	\$	\$	\$
Gas	Yr or Mth	\$	\$	\$
Electrical	Yr or Mth	\$	\$	\$
Water/Sewer	Yr or Mth	\$	\$	\$
Trash Removal	Yr or Mth	\$	\$	\$
Pest Control	Yr or Mth	\$	\$	\$
Casual Labor	Yr or Mth	\$	\$	\$
General repair: Maintenance of Int. and Ext.	Yr or Mth	\$	\$	\$
Management Expenses	Yr or Mth	\$	\$	\$
Supplies: Janitorial	Yr or Mth	\$	\$	\$
				\$

Estimated remaining life (years) of appliances	1	2	3	4
Stove/Range	years	years	years	years
Refrigerator	years	years	years	years
Dishwasher	years	years	years	years
FAU (forced air unit / heat only)	years	years	years	years
FAU w/AC (forced air unit w/air condition)	years	years	years	years
Hot water heater	years	years	years	years
Wall Furnace	years	years	years	years
Floor Furnace (Gravity)	years	years	years	years
Roof	years	years	years	years
Flooring	years	years	years	years

Please fax back to 888-559-3793

Preparer: print name _____ sign _____ and date _____