

GROSS ANNUAL INCOME FROM PROPERTY

1:00 Potential Annual Rental Income
 (Note: Report above as if 100% occupied including Manager/Caretaker Suite as if rented) \$ _____

2:00 Vacancy Loss (Loss in Rental Income due to Vacancies) \$ _____

2.10 Annual Rental Incentives (if any) \$ _____

2.11 Parking \$ _____

2.12 Laundry \$ _____

Other Income (Please specify) _____ \$ _____

_____ \$ _____

_____ \$ _____

SERVICES

INSTRUCTIONS:

A. Please indicate the services supplied to the units and paid for by the owner by showing the number of units in the appropriate column.

	Services Paid by Owner	Avg. Monthly Cost Per Unit	Services Paid by Tenant
Service	# of Units		# of Units
Heat			
Electricity			
Water			
Garbage			
Cablevision			
Furniture			
Other - Specify			

ACTUAL EXPENSES

For Full Fiscal Year Ending _____, 20__

(Do not include mortgage interest, debt charges, or capital cost allowances)

General	Amt Paid	Assessor's Use
31 Management	\$	
32 Wages Caretaker		
33 Annual Insurance		
34 Property Taxes		
35 Heat		
36 Electricity		
37 Water		
38 Garbage		
39 Cablevision		
40 Furniture		
Maintenance		
41 Painting/Decorating		
42 Repairs/Mntce.		
43 Elevators		
44 Pool		
45 Other		
Replacement		
51 Appliances		
53 Carpets		
54 Roof		
55 Windows		
56 Paving		
Miscellaneous		
61 Supplies		
62 Legal & Audit		
63 Advertising		
64 Security Deposit Int. Pd.		
65 Bad Debt		
66 Office & Telephone		
67 Bank Service Charges		
68 Rental Incentives		
69 Miscellaneous		
Total Actual Expenses:		

Signature Box

Has there been an appraisal on this property since January 1, 2018? yes no
 If yes, please include a copy of the appraisal report or indicate the appraised value, date of the appraisal, and its purpose. _____
 Is your property currently listed for sale, or has it been listed within the last 12 months? yes no
 If yes, what was the list price? _____

 Owner's Name (Please Print) **OR** _____
 Manager's Name (Please Print)

 Signature (Owner/Agent) _____
 Manager's Signature

 Phone Number _____ Date _____
 Phone Number _____ Date _____

Comments: _____

The information collected as part of this property valuation/income expense statement is done so under the authority of the Municipal Government Act (MGA) section 295(1) and is protected under the Freedom of Information and Protection of Privacy (FOIP) Act. Information will be used solely for the purpose of determining a fair and equitable assessed value of your property. If you have questions about the collection, use or protection of this information, please contact the Revenue and Assessment Services Department at 403-342-8126, 4914 - 48 Ave, PO Box 5008, fourth floor, City Hall, Red Deer, AB T4N 3T4. assessment@reddeer.ca