

Owner \_\_\_\_\_

Property Address \_\_\_\_\_

Tenant Name	Size Sq. Ft.	2016 Annual Rent	Tenant Use i.e. Office, Retail Restaurant or Residential	Utilities Included in Rent G=gas E=electric W=water C=cable	Vacancy
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

Please use white space for additional occupancies

**Expense Reimbursements OTHER THAN Real Estate TAXES**

\_\_\_\_\_ \$ \_\_\_\_\_  
\_\_\_\_\_ \$ \_\_\_\_\_

**Operating Expenses 2016** \*Please express in annual terms

**Insurance** \$ \_\_\_\_\_

**Utilities**

Gas \$ \_\_\_\_\_

Electric \$ \_\_\_\_\_

Water \$ \_\_\_\_\_

**Repairs/Maintenance**

Salaries/Benefits \$ \_\_\_\_\_

Materials/Supplies \$ \_\_\_\_\_

Janitorial Service & Supplies \$ \_\_\_\_\_

Contracted Services \$ \_\_\_\_\_

Trash/Refuse \$ \_\_\_\_\_

Landscape & Grounds Care \$ \_\_\_\_\_

Snow Removal \$ \_\_\_\_\_

Elevators \$ \_\_\_\_\_

**Other (do not include debt service, interest or depreciation)**

Management Fees \$ \_\_\_\_\_

Advertising/Leasing \$ \_\_\_\_\_

Professional Services (e.g., Legal) \$ \_\_\_\_\_

Capital Replacements Reserve \$ \_\_\_\_\_

Miscellaneous \$ \_\_\_\_\_

Amenities at the facility (on-site parking etc). If none, please state.

\_\_\_\_\_  
\_\_\_\_\_