



Marsha M. Faux, CFA, ASA
 Polk County Property Appraiser
INCOME/EXPENSE ANALYSIS: MULTI FAMILY
(For Calendar Year 1/1/2020 through 12/31/2020)
REAL ESTATE DIVISION

BUSINESS / COMPLEX NAME: _____
PROPERTY LOCATION: _____

PARCEL ID: _____

INCOME:

RENTAL INCOME		\$	_____
VACANCY	<u>%</u>		<u># UNITS</u>
RENT CONCESSIONS	\$	_____	
COLLECTION LOSS	\$	_____	
OTHER INCOME	\$	_____	
TOTAL INCOME		\$	_____

EXPENSES:

ADMINISTRATIVE		\$	_____
MANAGEMENT FEES	\$	_____	
ADVERTISING	\$	_____	
PAYROLL EXPENSE	\$	_____	
ACCOUNTING & LEGAL	\$	_____	
OTHER ADMINISTRATIVE	\$	_____	
MAINTENANCE & REPAIRS		\$	_____
ELECTRIC, PLUMBING, HVAC	\$	_____	
EXTERIOR REPAIRS	\$	_____	
ROOF REPAIR	\$	_____	
INTERIOR PAINT & REPAIRS	\$	_____	
MISC. MAINTENANCE	\$	_____	
UTILITIES		\$	_____
ELECTRCITY	\$	_____	
WATER & SEWER	\$	_____	
CABLE/INTERNET	\$	_____	
SERVICES		\$	_____
TRASH REMOVAL	\$	_____	
LANDSCAPING	\$	_____	
SECURITY	\$	_____	
PEST CONTROL	\$	_____	
MISCELLANEOUS	\$	_____	
REAL ESTATE TAXES	\$	_____	
REAL ESTATE INSURANCE	\$	_____	
OTHER EXPENSES	\$	_____	
RESERVES FOR REPLACEMENT	\$	_____	
TOTAL EXPENSES		\$	_____
NET OPERATING INCOME		\$	_____
CAPITAL EXPENDITURES	\$	_____	



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UNIT TYPE	UNIT SIZE (SqFt)	# OF UNITS	MONTHLY RENT	# OCCUPIED
Efficiency				
Studio				
1 Br 1 Bath				
2 Br 1 Bath				
2 Br 1 1/2 Bath				
2 Br 2 Bath				
3 Br 2 Bath				
Townhouse 2 Br				
Townhouse 3 Br				
Other				

UTILITIES INCLUDED IN RENT (CIRCLE ALL THAT APPLY)				
ELECTRIC	WATER	SEWER	CABLE	INTERNET
PHONE	OTHER:			

PREMIUM CHARGES (floor location, garages, covered parking, storage units, etc.)			
DESCRIPTION	# AVAILABLE	ADD'L RENT	# OCCUPIED
1ST FLOOR UNIT			
2ND FLOOR UNIT			
3RD FLOOR UNIT			
GARAGE			
COVERED PARKING			
STORAGE UNITS			
OTHER:			

MISCELLANEOUS INFORMATION:			
IS THIS PROPERTY SUBSIDIZED?	_____	BY WHOM?	_____
HOW MANY UNITS SUBSIDIZED?	_____	ANNUAL AMT.	\$ _____
IS THIS INCLUDED IN THE RENT INCOME ON PAGE 1?	_____	Y / N	
EXPLAIN:	_____		
PLEASE PROVIDE A RENT ROLL OR BREAKDOWN OF RENTAL RATES FOR ALL SUBSIDIZED UNITS			

SIGNATURE/TITLE _____
DATE _____ **TELEPHONE #** _____
EMAIL ADDRESS _____