access 311 stjohns.ca ONE STOP CITY SERVICE PLEASE PRINT	FIN1011	FINANCIAL MANAGEMENT

PROPERTY INCOME QUESTIONNAIRE
GENERAL QUESTIONNAIRE 2016 Re-Assessment

SECTION 1

CONTACT INFORMATION (to be completed by the applicant):

Account Number:

Location of Property:

Name of Owner:

Contact Person:

Email of Contact:

Phone Number:

Leasable Area:

Vacant Area:

SECTION 2

Please indicate (x) if this property was purchased, offered for sale, appraised, or renovated within the last five (5) years.

Purchased: Yes ___ No ___ **Listed for sale:** Yes ___ No __

Appraised: Yes ___ No ___ **Renovated:** Yes ___ No __

If an appraisal has been completed on the subject property, please forward a copy of the report with this submission.

SECTION 3

Particulars to be furnished by Owners for each of the **three (3) years 2011, 2012 & 2013 ending December 31st.** A copy of the Statement of Operations (the Income and Expense portion of the Annual Financial Statements) must accompany this form upon submission.

FOR THE FISCAL OR OPERATING YEAR ENDING			
OPERATING REVENUE	*2011*	*2012*	*2013*
Rental Income			
Office Rent			-
Retail Rent - Basic			

ST. JOHN'S
NEWFOUNDLAND AND LABRADOR, CANADA

Storage Rent			
Warehouse Rent			
Parking Rent			
Furniture & Chattels Rent			
Leasehold Improvements Rent			
Miscellaneous Income			
OTHER			
RECOVERY INCOME (Recharged Operating Income)			
Taxes			
Common Area Charges			
Heating/Air Conditioning			
Electricity			
Management & Administration			
Other			
TOTAL RECOVERY INCOME			
Total Actual Revenue (Rental & Recovery)			
Rental Value of Vacant Space			
Total Potential Revenue			
OPERATING EXPENSES:	*2011*	*2012*	*2013*
Property Taxes			
Other Taxes			
Heating			
Air Conditioning			
Electricity (Light & Power)			
Water			
Wages & Salaries (excluding management & administration)			
Cleaning & Housekeeping			-
Maintenance & Repairs (if major repairs, detail on separate sheet)			
Painting & Decorating			

Property & Liability Insurance			
Supplies			
Snow & Garbage Removal			
Legal, Audit & Professional Fees			
Management & Administration			
Elevator/Escalator Expenses			
Other Expenses			
TOTAL OPERATING EXPENSES*			
NET OPERATING INCOME			

	2011	***2012***	***2013***
Total Area Occupied			
Total Area Vacant			
Total Area Leaseable			

* Before interest on mortgage debt, depreciation or amortization, capital cost allowance and any other non-operating expenses.

Date:_____ Signature: _____ Position: _____ Phone:

Please mail completed form to:

City of St. John's
Assessment Division,
Financial Management
P.O. Box 908
St. John's NL A1C 5M2

For more information:
Call: Gareth Griffiths (709) 576-8233
E-mail: assessment@stjohns.ca
Fax: (709) 576-8603

ST. JOHN'S
NEWFOUNDLAND AND LABRADOR, CANADA