



Neil Combee
Polk County Property Appraiser
INCOME/EXPENSE ANALYSIS: HOTELS
(For Previous Calendar Year 1/1 through 12/31)
REAL ESTATE DIVISION

ADA Compliant
R. 11/2024

BUSINESS NAME:
PROPERTY AKA:
PROPERTY LOCATION:

PARCEL ID:

INCOME:

GROSS POSSIBLE RENTS AT 100% OCCUPANCY

| | | |
|----------------------------|----|----------|
| RENTAL INCOME | \$ | |
| FOOD AND BEVERAGE | \$ | |
| BANQUET AND CONVENTION | \$ | |
| RETAIL / RESTAURANT RENTAL | \$ | |
| OTHER INCOME | \$ | |
| SUBTOTAL GROSS INCOME | | \$ _____ |

COST OF GOODS SOLD EXPENSE

| | | |
|-----------------------------|----|----|
| FOOD AND BEVERAGE | \$ | |
| BANQUET AND CONVENTION | \$ | |
| OTHER DIRECT EXPENSE | \$ | |
| SUBTOTAL COST OF GOODS SOLD | | \$ |

TOTAL OPERATING INCOME \$

EXPENSES:

| | |
|--------------------------|----|
| PROPERTY INSURANCE | \$ |
| UTILITIES | \$ |
| REPAIRS/MAINTENANCE | \$ |
| MANAGEMENT FEE PAYROLL | \$ |
| & BENEFITS ADVERTISING & | \$ |
| MARKETING PROFESSIONAL | \$ |
| FEES GENERAL/ | \$ |
| ADMINISTRATIVE REAL | \$ |
| FRANCHISE FEE | \$ |
| RETAIL/RESTAURANT RENTAL | \$ |

TOTAL OPERATING EXPENSES \$

NET OPERATING INCOME \$

PLEASE FILL OUT ALL PAGES OF THE FORM

NOTE: IN LIEU OF THE FORM, A YEAR END PROFIT & LOSS STATEMENT AND RENT ROLL AS OF JANUARY 1ST CAN BE PROVIDED

OTHER EXPENSES:

| | |
|--------------------------|----|
| REAL ESTATE TAXES | \$ |
| RESERVES FOR REPLACEMENT | \$ |
| CAPITAL EXPENDITURES | \$ |

PLEASE DESCRIBE THE CAPITAL IMPROVMENTS COMPLETED IN THE PAST CALENDAR YEAR

PROPERTY TYPE:

| DESCRIPTION | TOTAL ROOM COUNT | AVG. OCCUPANCY | AVG DAILY RATE (ADR) | REVPAR |
|-----------------|---------------------|----------------|-------------------------|--------|
| FULL SERVICE | | | | |
| LIMITED SERVICE | | | | |
| EXTENDED STAY | | | | |
| OTHER | | | | |

ADDITIONAL INFORMATION:

| AMENITY | SIZE (SqFt) | LEASED OR OWNER OCCUPIED | IF LEASED MONTHLY RATE | TERMS OF LEASE |
|--------------------|-------------|-----------------------------|---------------------------|-------------------|
| RESTAURANT | | | | |
| LOUNGE | | | | |
| BANQUET FACILITIES | | | | |
| CONVENTION ROOMS | | | | |
| OTHER | | | | |
| OTHER | | | | |
| OTHER | | | | |

PREPARER INFORMATION:

NAME & TITLE
EMAIL ADDRESS
TELEPHONE #
DATE

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