



# Marsha M. Faux, CFA, ASA

ADA Compliant  
R. 01/2024

Polk County Property Appraiser

## INCOME/EXPENSE ANALYSIS: MULTI-TENANT RETAIL

(For Previous Calendar Year 1/1 through 12/31)

REAL ESTATE DIVISION

BUSINESS NAME:  
PROPERTY AKA:  
PROPERTY LOCATION:

PARCEL ID:

### INCOME:

|                         |    |           |
|-------------------------|----|-----------|
| RENTAL INCOME           |    | \$        |
| VACANCY                 | %  | (Sqft)    |
| TENANT REIMBURSEMENTS   |    |           |
| COMMON AREA MAINTENANCE | \$ |           |
| INSURANCE               | \$ |           |
| REAL ESTATE TAXES       | \$ |           |
| OTHER                   | \$ |           |
| TOTAL REIMBURSEMENTS    |    | \$        |
| <b>TOTAL INCOME</b>     |    | <b>\$</b> |

### EXPENSES:

|                                 |    |           |
|---------------------------------|----|-----------|
| PROPERTY INSURANCE              | \$ |           |
| UTILITIES                       | \$ |           |
| REPAIRS/MAINTENANCE             | \$ |           |
| MANAGEMENT FEE                  | \$ |           |
| PAYROLL & BENEFITS              | \$ |           |
| ADVERTISING & MARKETING         | \$ |           |
| PROFESSIONAL FEES               | \$ |           |
| GENERAL/ADMINISTRATIVE          | \$ |           |
| <b>TOTAL OPERATING EXPENSES</b> |    | <b>\$</b> |
| <b>NET OPERATING INCOME</b>     |    | <b>\$</b> |

### OTHER EXPENSES:

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

PLEASE DESCRIBE THE CAPITAL IMPROVMENTS COMPLETED IN THE PAST CALENDAR YEAR

PLEASE FILL OUT ALL PAGES OF THE FORM

**ADDITIONAL INFORMATION:**

| UNIT # OR ADDRESS | TENANT NAME | NET LEASABLE<br>AREA (SqFt) | LEASE START &<br>END DATE | BASE RENT PER<br>SQFT | CAM PER<br>SQFT | % LEASE<br>AMOUNT | ADDITIONAL<br>RENT |
|-------------------|-------------|-----------------------------|---------------------------|-----------------------|-----------------|-------------------|--------------------|
|-------------------|-------------|-----------------------------|---------------------------|-----------------------|-----------------|-------------------|--------------------|

**PREPARER INFORMATION:**

NAME & TITLE  
EMAIL ADDRESS  
TELEPHONE #  
DATE

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