

ANNUAL PROPERTY OPERATING DATA FORM

Borrower/Grantor Name(s)	Date
Property Address	
County	
Type of Business/Real Estate	

Please complete the information below to the best of your knowledge, as it pertains to the property listed above.

<u>MONTHLY RENTAL INCOME:</u>	<u>OCCUPIED?</u>	<u>COMMENTS</u>
Unit No. _____: \$ _____/month	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Unit No. _____: \$ _____/month	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Unit No. _____: \$ _____/month	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Unit No. _____: \$ _____/month	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Unit No. _____: \$ _____/month	<input type="checkbox"/> Yes <input type="checkbox"/> No	
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Unit No. _____: \$ _____/month	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Unit No. _____: \$ _____/month	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Unit No. _____: \$ _____/month	<input type="checkbox"/> Yes <input type="checkbox"/> No	

<u>YEARLY OPERATING EXPENSES:</u>			
Accounting/Legal	\$ _____/year	Trash Removal	\$ _____/year
Advertising	\$ _____/year	Supplies	\$ _____/year
Property Insurance	\$ _____/year	Electricity	\$ _____/year
Property Management	\$ _____/year	Gas	\$ _____/year
Real Estate Taxes	\$ _____/year	Fuel Oil	\$ _____/year
Repairs/Maintenance	\$ _____/year	Water & Sewer	\$ _____/year
Janitorial	\$ _____/year	Telephone	\$ _____/year
Lawn Care	\$ _____/year	Other: _____	\$ _____/year
Snow Removal	\$ _____/year	Other: _____	\$ _____/year