**HOTEL/ MOTEL** INCOME QUESTIONNAIRE FOR THE 36 MONTHS FROM 1/1/2015TO 12/31/2017

# «PROPERTY\_NAME» «OWNER\_OF\_RECORD»

«ADDRESS\_OF\_PROPERTY» «TAX\_ACCOUNT\_s»

Total Number of Rentable Rooms: \_\_\_\_\_\_\_\_\_\_\_Number of Parking Spaces: \_\_\_\_\_\_\_\_\_\_\_

**2015 2016 2017**

Average Annual Rate/Room/Day $

Average Number of Rooms Occupied/Day $

SEE ATTACHED FINANCIALS

Percentage of Occupancy for Year $

**ANNUAL INCOME:**

1. Room Rentals

2. Food $

3. Beverages $

4. Telephone Service $

5. Other Income (Attach List) $

6. Retail Tenant (Attach List) $

7. Totals (Lines 1-6) $

**EXPENSES:**

8. Rooms $

9. Food and Beverages $

10. Telephone Service $

11. Other Costs (Attach Itemized List) $

12. Total (Lines 8-11) $

13. Gross Operating Income (Line 7 minus Line 12) $

**UNALLOCATED EXPENSES:**

14. Administrative & General Expenses $

15. Marketing $

16. Energy $

17. Property Operations & Maintenance $

18. Fire Insurance & Extend. Coverage $

19. Management Fee $

20. Franchise Fees $

21. Total (Lines 14-20) $

22. NOI (Line 13 minus Line 20) $

23. Real Estate Taxes $

25. Building Depreciation $

26. Capital Expenditure (List) $

27. Furn., Fixtures & Equip. Total Value $

28. Other Intangible Values Assigned $

## MORTGAGES/SALES INFORMATION

1. Is there a current mortgage on this property? Yes\_\_\_\_\_\_ No\_\_\_\_\_\_\_

2. If “yes,” please provide the following data: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of Mortgage Mortgage Amount

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Interest Rate Term of Mortgage Date 1st Payment Monthly Payment

3. Please Provide Date Purchased \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Consideration \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

4. Is there a lease or management agreement? If so, please summarize the terms and conditions of agreement:

TYPE: ( ) SALE-LEASEBBACK ( ) LEASE ( ) MANAGEMENT

OTHER ( ) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

LEASE OR MANAGEMENT CO. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

DATE \_\_\_\_\_\_\_ TERM \_\_\_\_\_\_\_ FEE \_\_\_\_\_\_\_\_\_\_\_

5. Is there a franchise agreement? Please summarize the terms and conditions of agreement:

Franchise or Management Co, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

DATE \_\_\_\_\_\_\_ TERM \_\_\_\_\_\_\_ FEE \_\_\_\_\_\_\_\_\_\_\_

6. Personal Property Account Number\_\_\_\_\_\_\_\_\_\_\_\_\_ Entity Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**I declare, under the penalties of perjury, that the contents of this form and the accompanying schedules and statements have been examined by me and are true, correct, and complete to the best of my knowledge, information, and belief.**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature Title of Signer Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Print Name of Signer Telephone Number

#51604 «CLIENT\_NAME» «CLIENTMATTER\_» «ATTORNEY»