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Advertising.....

Other.....

## Office of the Commissioner of the Revenue **Income and Expense Survey**

Jan 1 2022-Dec 31 2022

		Joudouri Courity 2024 ASSE		20001 2022	
Owner	Name:		PIN:		
Manag	gement Company:		Phone Number:		
Subjec	et Address:		Email: Signature:		
Conta	ct Person:	_			
Date:			Print Name:		
Has th	ere been an appraisal performed on this p	property in the last	Date:		
three		, ,	Value:		
			Type:		
Have 1	here been any capital improvements during	ng this reporting period?	Cost:		
Is the	building 100% owner occupied?		Type of Lease:		
	a single tenant lease 75% or more?				
		s and statements have been examin	ned by me and to the best of my knowledge are true, o	correct, and complete.	
	Income				
	Income				
1.	Office Income				
2.	Retail Income				
3.	Warehouse Income				
4.	Parking Income				
5.	Retail Overage/Percentage Rent	5.			
6.	Other	6 <b>.</b>			
Rever	ue Expense Recoveries		EGI		
7.	Common Area Maintenance Recoveri	es <b>7.</b>			
8.	Real Estate Tax Recoveries				
9.	Insurance Recoveries				
10.	Operating Expense Recoveries	-			
11.	Other				
	nue Loss for Reporting Period		DCI C		
		40	PGI		
12.	Income Loss from Vacancy				
13.	Bad Debts/Rent Loss				
14.	Rent Concessions Other				
15.	Other	13.			
PART	Expenses				
Utility		Pa Te	id by mant <b>Service</b>	Paid by Tenant	
1.	Electricity		21. Landscaping		
2.	Water and Sewer		22. Trash Removal		
	Gas/Oil		23. Security		
3.					
4.	Telecommunications				
5.	Other	<b>3.</b>	25. Other	25.	
Janito			Administrative and General	00	
6.	Janitorial	<b>6.</b>	26. Payroll and Administration		
•	tions and Maintenance	_	27. Legal and Accounting		
7.	Maintenance Payroll		28. Payroll Taxes		
8.	Maintenance Supplies		29. Employee Benefits		
9.	HVAC Repairs		<b>30.</b> Other	30.	
10.	Electric Repairs		Management		
11.	Plumbing Repairs		<ol><li>Salaries, Wages, and Benefits</li></ol>	31.	
12.	Elevator Repairs/Maintenance	12.	32. Leasing Commissions	. 32.	
13.	Common Area/Exterior Repairs	13.	<b>33.</b> Other		
14.	Decorating		Miscellaneous		
15.	Roof Repairs		34. Miscellaneous	34.	
16.	Parking Lot/Garage Repairs		Taxes and Insurance	2.22	
17.	Other		35. Business Personal Property Tax	35.	
Marke			36. Business License Tax		
18	Salaries Wages and Benefits	18	37 Ruilding Insurance	30.	

The Income and Expense information MUST be placed on this form. Please attach a detailed rent roll. Supplemental information such as a complete operating statement should be included. If you should have any questions or need assistance, please contact our office.

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39.

Real Estate Taxes and Reserves

39. Real Estate Taxes.....

40. Reserves for Replacement.....

OFFICIAL REQUEST: TITLE 58.1-3294 CODE OF VIRGINIA - Each statement shall be certified as to its accuracy by an owner of the real estate for which the statement is furnished, or a duly authorized agent thereof. Any statement required by this section shall be kept confidential in accordance with the provisions of § 58.1-3. The failure of the owner of income-producing property, except property producing income solely from the rental of no more than four dwelling units, and exceptproperty being used exclusively as an owner-occupied property, not as a hotel, motel, or office building over 12,000 square feet, and not engaged in a retail or wholesale business where merchandise for sale is displayed, to furnish a statement of income and expenses as required by this section shall bar such owner or his representative from introducing into evidence, or using in any other manner, any of the required but not furnished income and expense information in any judicial action brought under §





## Office of the Commissioner of the Revenue Income and Expense Survey

Loudoun County 2024 Assessment Valuation

Jan 1 2022-Dec 31 2022

PART III	Property	Character	istics

Type of Space	Total Building Square Footage	Leasable Square Footage	Square Footage Leased	Square Footage Vacant
Shell Space*:				
Retail:				
Warehouse/Warehouse				
Condo**:				
Finished Office:				
Finished Retail:				
Storage Mezzanine:				
Finished Mezzanine:				
Office/Office Condo:				
Other:				No.
Total:				
*The area that is not avaliable for tena	ncy without significant capital	mnrovements		

*The area that is not avaliable for tenancy without significant ca **Identify showroom space with retail and/or office. Please use					
PART IV Ownership within the Project			_		
Do any of the tenants own their own buildings?	If yes, pl	If yes, please list the tenants:			
PART V Ground Leases within the Project					
Do any of the tenants lease ground?	If yes, please list th	If yes, please list the tenant names and parties to the Ground Lease:			
PART J=Notes		1 7			
	1 T W				
	-				
	1 4 1				
	100				
PART V=Summary					
owca Y. .EGI	91 dYb				
Revenue Loss	1. 2.	Utility Janitorial			
PGI	3.	Operations and Maintenance			
.NOI <b>4.</b>	4.	Marketing	4.		
	5.	Service	5.		
	6.	Administrative and General			
	7.	Management			
	8.	Miscellaneous			
	9.	Taxes and Insurance			
	10.	Real Estate Taxes and Reser	rves <b>10.</b>		

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