



Office of the Commissioner of the Revenue

Income and Expense Survey Loudoun County 2025 Assessment Valuation

Jan 1 2023-
Dec 31 2023

A



Owner Name: _____

PIN: _____

Management Company: _____

Phone Number: _____

Subject Address: _____

Email: _____

Contact Person: _____

Signature: _____

Date: _____

Print Name: _____

Has there been an appraisal performed on this property in the last three years?

Date: _____

Have there been any capital improvements during this reporting period?

Value: _____

Is the building 100% owner occupied?

Type: _____

Does a single tenant lease 75% or more?

Cost: _____

Type of Lease: _____

All information including the accompanying schedules and statements have been examined by me and to the best of my knowledge are true, correct, and complete.

PART I Income

Actual Income

- 1. Office Income..... 1.
- 2. Retail Income..... 2.
- 3. Warehouse Income..... 3.
- 4. Parking Income..... 4.
- 5. Retail Overage/Percentage Rent..... 5.
- 6. Other..... 6.

Revenue Expense Recoveries

- 7. Common Area Maintenance Recoveries.... 7.
- 8. Real Estate Tax Recoveries..... 8.
- 9. Insurance Recoveries..... 9.
- 10. Operating Expense Recoveries..... 10.
- 11. Other..... 11.

Revenue Loss for Reporting Period

- 12. Income Loss from Vacancy..... 12.
- 13. Bad Debts/Rent Loss..... 13.
- 14. Rent Concessions..... 14.
- 15. Other..... 15.

EGI \$ 0

PGI \$ 0

PART II Expenses

Utility

- 1. Electricity..... 1.
- 2. Water and Sewer..... 2.
- 3. Gas/Oil..... 3.
- 4. Telecommunications..... 4.
- 5. Other..... 5.

Janitorial

- 6. Janitorial..... 6.

Operations and Maintenance

- 7. Maintenance Payroll..... 7.
- 8. Maintenance Supplies..... 8.
- 9. HVAC Repairs..... 9.
- 10. Electric Repairs..... 10.
- 11. Plumbing Repairs..... 11.
- 12. Elevator Repairs/Maintenance..... 12.
- 13. Common Area/Exterior Repairs..... 13.
- 14. Decorating..... 14.
- 15. Roof Repairs..... 15.
- 16. Parking Lot/Garage Repairs..... 16.
- 17. Other..... 17.

Marketing

- 18. Salaries, Wages, and Benefits..... 18.
- 19. Advertising..... 19.
- 20. Other..... 20.

Paid by
Tenant

Service

- 21. Landscaping..... 21.
- 22. Trash Removal..... 22.
- 23. Security..... 23.
- 24. Snow Removal..... 24.
- 25. Other..... 25.

Administrative and General

- 26. Payroll and Administration..... 26.
- 27. Legal and Accounting..... 27.
- 28. Payroll Taxes..... 28.
- 29. Employee Benefits..... 29.
- 30. Other..... 30.

Management

- 31. Salaries, Wages, and Benefits..... 31.
- 32. Leasing Commissions..... 32.
- 33. Other..... 33.

Miscellaneous

- 34. Miscellaneous..... 34.

Taxes and Insurance

- 35. Business Personal Property Tax... 35.
- 36. Business License Tax..... 36.
- 37. Building Insurance..... 37.
- 38. Other..... 38.

Real Estate Taxes and Reserves

- 39. Real Estate Taxes..... 39.
- 40. Reserves for Replacement..... 40.

Paid by
Tenant

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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PART III Property Characteristics

Table with 5 columns: Type of Space, Total Building Square Footage, Leasable Square Footage, Square Footage Leased, Square Footage Vacant. Rows include Shell Space*, Retail, Warehouse/Warehouse, Condo**, Finished Office, Finished Retail, Storage Mezzanine, Finished Mezzanine, Office/Office Condo, Other, and Total.

*The area that is not available for tenancy without significant capital improvements.

**Identify showroom space with retail and/or office. Please use this section for flex space.

PART IV Ownership within the Project

Do any of the tenants own their own buildings?

If yes, please list the tenants:

PART V Ground Leases within the Project

Do any of the tenants lease ground?

If yes, please list the tenant names and parties to the Ground Lease:

PART VI Notes

PART VII Summary

Income:

Table with 4 rows: 1. EGI, 2. Revenue Loss, 3. PGI, 4. NOI. Each row has a numbered box and a \$0 value.

Expenses:

Table with 10 rows: 1. Utility, 2. Janitorial, 3. Operations and Maintenance, 4. Marketing, 5. Service, 6. Administrative and General, 7. Management, 8. Miscellaneous, 9. Taxes and Insurance, 10. Real Estate Taxes and Reserves. Each row has a numbered box and a \$0 value.

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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 except property 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 § 58.1-3984.