|  |  |  |
| --- | --- | --- |
| **Property Location:** | **Apartment Property** | **Calendar Year:** |
| **Assessing Parcel ID:** | **Rental Income Statement** | **Submitted By:** |

Residential Rental Information: Please provide the following rental information.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Unit Type** | **No. of Units** | **Room Count** | **Monthly Rent** | **Typical Lease Term** | **Includes the following:** |
| Total |  Rooms | Bath-room | Per Unit | Total | **Lease or****Tenant at Will (TAW)** | **W: Water Sewer****E: Electricity****Heat: Oil/Gas/Elec****Other: Explain** |
| *Single Room Occupancy(SRO)* |  |  |  |  |  |  |  |
| Studio |  |  |  |  |  |  |  |
| 1 Bedroom |  |  |  |  |  |  |  |
| 2 Bedroom |  |  |  |  |  |  |  |
| 3 Bedroom |  |  |  |  |  |  |  |
| 4 Bedroom |  |  |  |  |  |  |  |
| Other Rentable Units(Furnished Units) |  |  |  |  |  |  |  |
| Owner/Manager/Janitor Occupied |  |  |  |  |  |  |  |
| **SUBTOTAL** |  |  |  |  |  |  |  |
| Garage Parking Space |  |  |  |  |  |  |  |
| Outdoor Parking Space |  |  |  |  |  |  |  |
| Other Income (Specify) |  |  |  |  |  |  |  |
| TOTAL |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |