



Chief Appraiser, Krystal L. McKinney RPA, CCA

## Commercial Income and Expense Questionnaire

Please complete this form to the best of your knowledge. All data submitted will remain confidential and used solely for appraisal purposes, as authorized under Section 22.27 of the Texas Property Tax Code.

**PROPERTY INFORMATION**

**REPORTING YEAR:**

Property Owner:	Property Id:
Property Address:	DBA:
Mailing Address:	Phone:

**OCCUPANCY & LEASE INFORMATION**

- Property Type:  Hospitality  Industrial  Multifamily  Retail  Office  
 RV/MH Park  Mini Warehouse  Other: \_\_\_\_\_
- Lease Start/End Date(s): \_\_\_\_\_
- Total Building Area/Total Net Rentable Area: \_\_\_\_\_
- Total Number of Rooms, Spaces, or Units: \_\_\_\_\_
- Total Vacancy Rate (%): \_\_\_\_\_
- Base Rent (\$/SF, Room, Space, Unit/Month) : \_\_\_\_\_
- CAM Charges (\$/SF, Room, Space, Unit/Month): \_\_\_\_\_
- Lease Type:  Gross  Triple Net (NNN)  Other: \_\_\_\_\_

**ANNUAL INCOME & OPERATING EXPENSES**

Category	Annual Amount
Base Rental Income	\$
Secondary Income (e.g., laundry, vending machines, application and late fees, admin & pet fees, parking, etc.)	\$
CAM/Reimbursement Income	\$
Total Operating Expenses	\$

\* Please attach the operating income statement, detailed rent roll, & itemized breakdown of operating expenses

**ADDITIONAL COMMENTS:**

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Survey Completed by: \_\_\_\_\_ Date: \_\_\_\_\_