TOWN OF LISBON

Annual Income and Expense Report
CONFIDENTAL

Return to:

TOWN OF LISBON
Assessor's Office
1 Newent Rd
Lisbon, CT 06351
860-376-5115
assessor@lisbonct.com

Property Location
Unique ID

March 29, 2023

FILING INSTRUCTIONS - Under current law, the Assessor's Office is required to reassess all real property in this municipality for the October 1, 2026 Grand List. In order to assess your real property fairly and equitably, information regarding the income and expenses related to your property is essential. Connecticut General Statutes, Section 12-63c requires owners of rental property to annually file the enclosed forms. Any information related to the actual rental and rental-related income and operating expenses shall not be a public record, and is not subject to the disclosure provisions of Connecticut General Statute Section 1-210 (Freedom of Information Act).

Please complete the enclosed forms and return them to this office on or before June 1, 2023. In accordance with Connecticut General Statute Section 12-63c(d), any owner of primarily rental real property who fails to file this form by June 1, 2023, or files an incomplete or false form with intent to defraud, shall be subject to a penalty assessment equal to a ten percent (10%) increase in the assessed value of such property. Pursuant to CGS 12-63c upon determination that there is good cause, the assessor may grant an extension of not more than 30 days to submit such information, if the owner of such property files a request for an extension with the assessor not later than May 1st.

GENERAL INSTRUCTIONS & DEFINITIONS: Please complete this form for all rented or leased apartment, commercial, retail, industrial or combination property. Identify the property and address and provide annual information for the calendar year 2022. TYPE/USE OF LEASED SPACE: Indicate the type of use the leased space is being utilized for (i.e., office, retail, warehouse, restaurant, garage, etc.). ESCALATION: Amount, in dollars, of adjustment to base rent either pre-set or tied to the Inflation Index. CAM: Income received from common area charges to tenant for common area maintenance, or other income received from the common area property. OVERAGE: Additional fee or rental income. This is usually based on a percent of sales or income. PROPERTY EXPENSES & UTILITIES PAID BY TENANT: Indicate the property expenses & utilities the tenant is responsible for. Abbreviations may be used (i.e., "RE" for real estate taxes & "E" for electricity).

WHO SHOULD FILE - All individuals and businesses receiving this form should complete and return this form to the Assessor's Office. All properties which are rented or leased, including commercial, retail, industrial and residential properties, except "such property used for residential purposes, containing not more than six dwelling units and in which the owner resides" must complete this form. If a non-residential property is partially rented and partially owner-occupied this report must be filed. If you believe that you are not required to fill out this form, please call the number listed above to discuss your special situation. **If a property is partially owner-occupied, this report must still be filed.**

IF YOUR PROPERTY IS 100% OWNER OCCUPIED, OR 100% LEASED TO A RELATED CORPORATION, BUSINESS FAMILY MEMBER OR OTHER RELATED ENTITY, PLEASE INDICATE BY CHECKING THE FOLLOWING BOX: ☐

ALL PROPERTY OWNERS MUST SIGN & RETURN THIS FORM TO THE LISBON ASSESSOR'S OFFICE ON OR BEFORE JUNE 1, 2023 OR BE SUBJECT TO THE TEN PERCENT (10%) PENALTY.

RETURN TO THE ASSESSOR ON OR BEFORE JUNE 1, 2023 TO AVOID THE TEN PERCENT (10%) PENALTY

2022 ANNUAL INCOME AND EXPENSE REPORT SUMMARY - CONFIDENTIAL

Owner Name ______________________ Property Location ______________________

Mailing Address ______________________ Unique ID ______________________

City/State/Zip ______________________ Phone ______________ Email ______________________

1 **Primary Property Use** (Check One) ☐ Apartment ☐ Office ☐ Retail ☐ Mixed Use ☐ Shopping Ctr. ☐ Industrial ☐ Other ____________

2 Gross Building Area
(Including Owner-Occupied Space) ____________ Sq. Ft.

3 Net Leasable Area ____________ Sq. Ft.

4 Owner-Occupied Area ____________ Sq. Ft.

5 Number Of Units ____________

6 Number of Parking Spaces ____________

7 Actual Year Built ____________

8 Year Remodeled ____________

INCOME - 2022

9 Apartment Rentals (From Schedule A) ____________

10 Office Rentals (From Schedule B) ____________

11 Retail Rentals (From Schedule B) ____________

12 Mixed Rentals (From Schedule B) ____________

13 Shopping Center Rentals (From Schedule B) ____________

14 Industrial Rentals (From Schedule B) ____________

15 Other Rentals (From Schedule B) ____________

16 Parking Rentals ____________

17 Other Property Income ____________

18 **TOTAL POTENTIAL INCOME**
(Add Line 9 Through Line 17) ____________

19 Loss Due to Vacancy and Credit ____________

20 **EFFECTIVE ANNUAL INCOME**
(Line 18 Minus Line 19) ____________

EXPENSES-2022

21 Heating/Air Conditioning ____________

22 Electricity ____________

23 Other Utilities ____________

24 Payroll (Except management) ____________

25 Supplies ____________

26 Management ____________

27 Insurance ____________

28 Common Area Maintenance ____________

29 Leasing Fees / Commissions / Advertising ____________

30 Legal and Accounting ____________

31 Elevator Maintenance ____________

32 Tenant Improvements ____________

33 General Repairs ____________

34 Other (Specify) ____________ ____________

35 Other (Specify) ____________ ____________

36 Other (Specify) ____________ ____________

37 Security ____________

38 **TOTAL EXPENSES** (Add Lines 21 Through 37) ____________

39 **NET OPERATING INCOME** (Line 20 Minus Line 38) ____________

40 Capital Expenses ____________

41 Real Estate Taxes ____________

42 Mortgage Payment (Principal and Interest) ____________

TOWN SEAL 1786 LISBON 1786 CONNECTICUT

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SCHEDULE A - 2022 APARTMENT RENT SCHEDULE

Complete this Section for Apartment Rental activity only.

UNIT TYPE	NO. OF UNITS		ROOM COUNT		UNIT SIZE	MONTHLY RENT		TYPICAL
	TOTAL	RENTED	ROOMS	BATHS	SQ. FT.	PER UNIT	TOTAL	LEASE TERM
EFFICIENCY								
1 BEDROOM								
2 BEDROOM								
3 BEDROOM								
4 BEDROOM								
OTHER RENTABLE UNITS								
OWNER/MANAGER/JANITOR OCCUPIED								
SUBTOTAL								
GARAGE/PARKING								
OTHER INCOME (SPECIFY)								
TOTALS								

BUILDING FEATURES INCLUDED IN RENT

(Please Check All That Apply)

- ☐ Heat
- ☐ Electricity
- ☐ Other Utilities
- ☐ Air Conditioning
- ☐ Stove/Refrigerator
- ☐ Dishwasher
- ☐ Garbage Disposal
- ☐ Other Specify ____________
- ☐ Furnished Unit
- ☐ Security
- ☐ Pool
- ☐ Tennis Courts
- ☐ Parking

SCHEDULE B - 2022 LESSEE SCHEDULE

Complete this Section for all other rental activities <u>excluding</u> apartment rentals.

NAME OF TENANT	LOCATION OF SPACE	LEASE TERM			ANNUAL RENT				PARKING		INTERIOR FINISH		
		START	END	SQ.FT	BASE	ESC/CAM OVERAGE	TOTAL	TOTAL PER SQ. FT.	NO. OF SPACES	ANNUAL RENT	OWNER	TENANT	COST
TOTALS													

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VERIFICATION OF PURCHASE PRICE (If Purchased After January 1, 2021)

Property Location ____________________

PURCHASE PRICE $ __________ DOWN PAYMENT $ __________ DATE OF PURCHASE __________

DATE OF LAST APPRAISAL __________ APPRAISAL FIRM __________ APPRAISED VALUE __________

					(Check One)	
					FIXED	VARIABLE
FIRST MORTGAGE	$ ______	INTEREST RATE	____ %	PAYMENT SCHEDULE TERM ____ YEARS		
SECOND MORTGAGE	$ ______	INTEREST RATE	____ %	PAYMENT SCHEDULE TERM ____ YEARS		
OTHER	$ ______	INTEREST RATE	____ %	PAYMENT SCHEDULE TERM ____ YEARS		
CHATTEL MORTGAGE	$ ______	INTEREST RATE	____ %	PAYMENT SCHEDULE TERM ____ YEARS		

DID THE PURCHASE PRICE INCLUDE A PAYMENT FOR: FURNITURE? $ __________ (Value) EQUIPMENT? __________ (Value) OTHER (Specify) $ __________ (Value)

HAS THE PROPERTY BEEN LISTED FOR SALE SINCE YOUR PURCHASE? (Check One) YES ☐ NO ☐

IF YES, LIST THE ASKING PRICE $ __________ DATE LISTED __________ BROKER __________

Remarks - Please explain any special circumstances or reasons concerning your purchase (I.e., vacancy, conditions of sale, etc.) __________

DO NOT FORGET TO SIGN BELOW!

I DO HEREBY DECLARE UNDER PENALTIES OF FALSE STATEMENT THAT THE FOREGOING INFORMATION, ACCORDING TO THE BEST OF MY KNOWLEDGE, REMEMBRANCE AND BELIEF, IS A COMPLETE AND TRUE STATEMENT OF ALL THE INCOME AND EXPENSES ATTRIBUTABLE TO THE ABOVE IDENTIFIED PROPERTY *(Section 12-63c(d) of the Connecticut General Statutes).*

SIGNATURE __________ NAME (Print) __________ DATE __________

TITLE __________ TELEPHONE __________ EMAIL __________

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