

INCOME SURVEY FOR CONVERTED RESIDENCE

The primary use type of this structure:

| LEASE INCOME INFORMATION Supporting documentation must be provided for all required years. | | | | | | | |
|--|-------------------|-------------|------|------|---|------|------|
| Tenant Name | Leased Sq. Ft. | Tenant Rent | | | CAM/Expense Pass Through/ Other Expense Pass Through (if charged) | | |
| | | 2022 | 2023 | 2024 | 2022 | 2023 | 2024 |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |

| EXPENSES Supporting documentation must be provided for all | ACTUAL YEARLY EXPENSES (Do not include real estate taxes or debt services) | | | | |
|--|--|------|------|--|--|
| required years. | 2022 | 2023 | 2024 | | |
| Management and Administrative: | | | | | |
| Utilities: | | | | | |
| Maintenance and Repairs: | | | | | |
| Association Fee (if any): | | | | | |
| TOTAL | | | | | |

| Additional Comn | nents or Information: |
|------------------|---|
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| Must include rer | nt rolls, leases, operating statements, annual profit and loss statements, or any |
| | supporting documents for all required years. |
| | |
| *Prepared By: | |
| Phone #: | |
| Email: | |

^{*}If prepared by and signed by a Tax Representative, an AV-59 must be completed and attached with this form.