

Rutherford County Assessor of Property

Commercial Property Income/Expense Questionnaire

Property Address: _____

Contact Number: _____

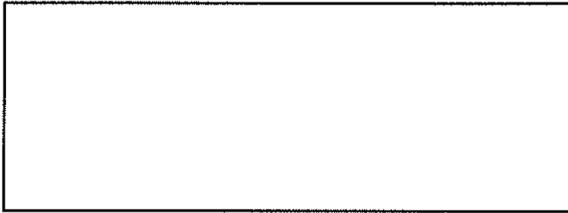
Building Name: _____

Name of Agent or Management Firm _____

Parcel: _____

Account: _____

Tax Year: _____



Rental Data:

Tenant	Unit #	Rent Rate Monthly	Expenses Passed Through	Unit Size Per Sq. Ft.	Lease Term	Lease Begins	Lease Ends
1) _____	_____	\$ _____	_____	_____	_____	_____	_____
2) _____	_____	\$ _____	_____	_____	_____	_____	_____
3) _____	_____	\$ _____	_____	_____	_____	_____	_____
4) _____	_____	\$ _____	_____	_____	_____	_____	_____
5) _____	_____	\$ _____	_____	_____	_____	_____	_____
6) _____	_____	\$ _____	_____	_____	_____	_____	_____
7) _____	_____	\$ _____	_____	_____	_____	_____	_____
8) _____	_____	\$ _____	_____	_____	_____	_____	_____
9) _____	_____	\$ _____	_____	_____	_____	_____	_____
10) _____	_____	\$ _____	_____	_____	_____	_____	_____

Gross Rents Possible \$ _____

Year End Vacancy Space _____ SqFt.

Other Income \$ _____

Who Pays Insurance? Owner _____

Tenant _____

Who Pays Taxes? Owner _____

Tenant _____

Who Pays Utilities?: Owner _____

Tenant _____

Who Pays Common Area Maintenance? Owner _____

Tenant _____

Does the Agent / Management Firm have an ownership in the property? YES or NO (Please Circle)

Are any operating expenses paid to persons with an ownership interest? YES or NO (Attach explanation if yes)

Do any tenants have a percentage rent clause in their lease? YES or NO (Attach explanation if yes)

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