

HOTELS, MOTELS AND RESORTS

NAME OF PROPERTY: _____

MAP _____ BLOCK _____ LOT _____ (IF THIS IS AN ECONOMIC UNIT, LIST THE LEAD PARCEL)

TOTAL NO. OF ROOMS: _____ RESTAURANT: (Y / N) _____ LOUNGE: (Y / N) _____ MEETING ROOMS: (Y / N) _____

AVERAGE DAILY RATE = \$ _____. ATTACH COPY OF CURRENT ROOM/RENT RATES IF AVAILABLE.

INCOME DATA SUMMARY: PROVIDE LATEST THREE YEAR HISTORY.

ANNUAL OCCUPANCY RATE FOR THE PAST THREE YEARS:

LAST YEAR: **20** _____ = _____%; SECOND YEAR: **20** _____ = _____%; THIRD YEAR: **20** _____ = _____%

	Last Year Year: <u>20</u> _____	Two Years Ago Year: <u>20</u> _____	Three Years Ago Year: <u>20</u> _____
POTENTIAL GROSS INCOME (100% OCCUPANCY) =	\$ _____	\$ _____	\$ _____
VACANCY AND COLLECTION LOSS (ACTUAL)	- _____	- _____	- _____
ADJUSTED GROSS INCOME	= _____	_____	_____
FOOD AND BEVERAGE INCOME	+ _____	+ _____	+ _____
TELEPHONE INCOME	+ _____	+ _____	+ _____
OTHER INCOME (SERVICE, MISC., ETC.)	+ _____	+ _____	+ _____
EFFECTIVE GROSS INCOME	= _____	_____	_____
TOTAL OF ALL EXPENSES	- _____	- _____	- _____
NET OPERATING INCOME	\$ _____	\$ _____	\$ _____

NOTE: IF THE PROPERTY IS SUBJECT TO A TIMESHARE PLAN (IN WHOLE OR IN PART) PLEASE ATTACH SALES/MARKETING/OWNERSHIP DATA ESTABLISHING VALUE LEVELS

ADDITIONAL INFORMATION/REMARKS

I certify under the pains and penalties of perjury that the information supplied herewith is true and correct (all lines below MUST be completed) and that this information has been submitted to the Assessors Office within the 60 day deadline as required by law:

Submitted by (Print Name): _____ Title: _____ Phone#: _____

Signature: _____ Date: _____

NOTE: You may submit any additional documents to support the income and expense information

HOTELS, MOTELS AND RESORTS EXPENSE DATA
PROVIDE THREE YEAR HISTORY

NOTE: FOR PROPER ANALYSIS, ALL EXPENSES REPORTED SHOULD BE THE **ACTUAL** AMOUNT INCURRED EACH YEAR.

DISALLOWED EXPENSES: DEPRECIATION, MORTGAGE DEBT SERVICE and PROPERTY TAX (effective tax rate will be added to the capitalization rate).

	Last Year <u>20</u>	Two Years Ago <u>20</u>	Three Years Ago <u>20</u>
<u>DEPARTMENTAL EXPENSES</u>			
ROOM EXPENSES	\$ _____	\$ _____	\$ _____
FOOD AND BEVERAGE EXPENSES	_____	_____	_____
TELEPHONE EXPENSES	_____	_____	_____
OTHER (DESCRIBE: _____)	_____	_____	_____
<u>ADMINISTRATIVE EXPENSES</u>			
MANAGEMENT FEES	_____	_____	_____
FRANCHISE FEES	_____	_____	_____
ADVERTISING / PROMOTION	_____	_____	_____
ADMINISTRATIVE / SALARIES	_____	_____	_____
<u>PROPERTY OPERATING EXPENSES</u>			
UTILITIES	_____	_____	_____
INSURANCE	_____	_____	_____
BLDG. MAINTENANCE AND REPAIRS	_____	_____	_____
PARKING LOT AND COMMON AREA	_____	_____	_____
SERVICE CONTRACTS	_____	_____	_____
JANITORIAL	_____	_____	_____
SUPPLIES	_____	_____	_____
OTHER (DESCRIBE: _____)	_____	_____	_____
<u>MAJOR REPLACEMENTS / REPAIRS</u> (From Pg. 3)			
_____	_____	_____	_____
TOTAL OF ALL EXPENSES =	\$ _____	\$ _____	\$ _____

NOTE: Attach any additional documents necessary to itemize expenses or replacements not sufficiently explained above.

LAST YEAR

MAJOR REPLACEMENT / REPAIRS

	DATE	TOTAL COST	+	AVG. LIFE (YRS)	=	ANNUAL AMT.
HEATING / COOLING	_____	\$ _____	+	_____	=	\$ _____
ROOFING	_____	\$ _____	+	_____	=	\$ _____
FLOOR COVERINGS	_____	\$ _____	+	_____	=	\$ _____
APPLIANCES / WATER HEATER	_____	\$ _____	+	_____	=	\$ _____
PAINTING (MULTI-UNIT)	_____	\$ _____	+	_____	=	\$ _____
OTHERS	_____	\$ _____	+	_____	=	\$ _____
(DESCRIBE: _____ _____)	_____	\$ _____	+	_____	=	\$ _____
TOTAL FOR LAST YEAR					=	\$ _____

TWO YEARS AGO

MAJOR REPLACEMENT / REPAIRS

	DATE	TOTAL COST	+	AVG. LIFE (YRS)	=	ANNUAL AMT.
HEATING / COOLING	_____	\$ _____	+	_____	=	\$ _____
ROOFING	_____	\$ _____	+	_____	=	\$ _____
FLOOR COVERINGS	_____	\$ _____	+	_____	=	\$ _____
APPLIANCES / WATER HEATER	_____	\$ _____	+	_____	=	\$ _____
PAINTING (MULTI-UNIT)	_____	\$ _____	+	_____	=	\$ _____
OTHERS	_____	\$ _____	+	_____	=	\$ _____
(DESCRIBE: _____ _____)	_____	\$ _____	+	_____	=	\$ _____
TOTAL FOR TWO YEARS AGO					=	\$ _____

THREE YEARS AGO

MAJOR REPLACEMENT / REPAIRS

	DATE	TOTAL COST	+	AVG. LIFE (YRS)	=	ANNUAL AMT.
HEATING / COOLING	_____	\$ _____	+	_____	=	\$ _____
ROOFING	_____	\$ _____	+	_____	=	\$ _____
FLOOR COVERINGS	_____	\$ _____	+	_____	=	\$ _____
APPLIANCES / WATER HEATER	_____	\$ _____	+	_____	=	\$ _____
PAINTING (MULTI-UNIT)	_____	\$ _____	+	_____	=	\$ _____
OTHERS	_____	\$ _____	+	_____	=	\$ _____
(DESCRIBE: _____ _____)	_____	\$ _____	+	_____	=	\$ _____
TOTAL FOR THREE YEARS AGO					=	\$ _____

NOTE: Attach any additional documents necessary to itemize expenses or replacements not sufficiently explained above.