

Annual Property Expenses

Parcel ID: _____

Calendar Year: _____

Management & Administration	Landlord Amount	Tenant Amount	Repairs & Alterations	Landlord Amount	Tenant Amount
Management Wages or Fee			Exterior		
Legal & Accounting			Interior		
Security Wages			Mechanical		
Payroll			Electrical		
Group Insurance			Plumbing		
Telephone			Total	_____	_____
Advertising					
Commissions					
Property Insurance (1 Yr)					
Total	_____	_____			
Maintenance & Cleaning			Utilities		
Wages			Electric		
Supplies			Gas		
Service Contract			Oil		
Grounds Keeping			Water/Sewer		
Rubbish Removal			Total	_____	_____
Snow Removal					
Exterminator			Other Expenses		
Other-Specify			Reserve for		
Total	_____	_____	Replacement		
			Real Estate Tax		
			Personal Prop Tax		
			Total	_____	_____
Capital Improvements **			Cost of Concessions		
** Description Required			Ex: Free Rent specific time period, Employee Apartment, Free Parking		
1			1		
2			2		
3			3		
Total	_____	_____			

I certify under the pains and penalties of perjury that the information supplied herewith is true and correct.

Signature, Submitted By

Phone

Title

Date