MIDDLESEX COUNTY BOARD OF TAXATION

STATEMENT OF INCOME AND EXPENSE

To be reported for your fiscal year ending October 1, 20____

Name of Owner _____

Address _____

City _____

Taxing District _____
Block # _____ Lot # _____
Address _____
Estimated age of Property _____ years
Estimated remaining economic life of property _____ years

INCOME

Itemize income for each individual apartment, store or rentable space of any kind, the gross annual rent from leases entered into and assigning reasonable rent to unoccupied and non-rented spaces and so indicate:

@	$
@	$
@	$
@	$
@	$
@	$
@	$
@	$
@	$
@	$
@	$
Other Income @	$
Total Gross Income per month	$
Actual rent loss by reason of vacancies for past 12 months	$
Actual rental income for last fiscal year	$

Reserve for Replacement

Item	Est.Life	Annual Reserve
		$
		$
		$
		$
		$
		$
		$
		$
		$
		$
		$
Total Reserve for Replacement		$

EXPENSES

OPERATING EXPENSE

Management	%	$
Fuel		$
Electricity & Gas		
Public Area & Oil Burner		$
Water		$
Superintendent-Apartment		$
Salary		$
Other Wages		$
FICA and other Employee Taxes		$
Painting & Decorating		$
Repairs & Maintenance (Explain below)		$
Reserve for Replacements (Itemize on table)		$
Miscellaneous		$
TOTAL OPERATING EXPENSE		$
FIXED CHARGES		
Insurance (Annual Basis)		$
Taxes		$
Owner's share $		$
Tenants' share $		
Mortgage (Interest)		$
(Principal)		$
Depreciation	%	$
Other (Explain below)		$
TOTAL FIXED CHARGES		$
TOTAL EXPENSE		$

REMARKS _____

USE ADDITIONAL SHEETS IF NECESSARY

Amount of Mortgage _____
Date of Mortgage _____
Terms of Mortgage _____

I hereby certify that the information furnished hereon, or attached hereto is correct and full statement of the above captioned property, to the best of my knowledge and belief.

Subscribed and sworn before me this _____
day of _____
(month) (year)
at _____
(City or Town)

_____
(Notary Public

_____
(Owner, Agent, Officer, Accountant, Etc.)

PHOTOSTATIC COPIES OF LEASES MUST BE SUBMITTED WITH THIS PETITION. IF NOT, PERTINENT CONDITIONS OF THE LEASE / LEASES WILL BE ACCEPTED.
ATTACH THIS STATEMENT TO PETITION OF APPEAL FORM AND COPY TO TAXING DISTRICT.