

# REAL PROPERTY INCOME AND EXPENSE FORM

File with the: Town of Catskill Assessor's Office  
439 Main Street, Catskill, NY 12414

## Section I: Property Identification

Section: \_\_\_\_\_ Block: \_\_\_\_\_ Lot: \_\_\_\_\_

Property Address: \_\_\_\_\_

\_\_\_\_\_

## Section II: Reporting Period

Please indicate the period covered in this statement:  
From: \_\_\_\_/\_\_\_\_/\_\_\_\_ To: \_\_\_\_/\_\_\_\_/\_\_\_\_

## Section III: Income Information (Cash Basis)

Rental from Tenants	Rental Area (sqft)	# of Units	Income (\$ per year)
A. Apartments (TOTAL)			
Non-Sponsor held co-op			
Rent Controlled			
Rent Stabilized			
B. Offices			
C. Retail			
D. Garage/Parking			
E. Storage/Lofts			
F. Warehouse/Industrial			
G. Other			
<b>TOTAL RENT</b>			
H. Owner-Occupied or Owner Related (Book Rent)			
I. Operating Escalation Income			
J. Water & Real Estate Tax Escalation			
K. Sales of Utilities & Services			
L. Common Area Charges			
M. Other			
<b>TOTAL GROSS INCOME</b>			
<b>TOTAL GROSS POTENTIAL INCOME:</b>			_____
<b>VACANCY &amp; CREDIT LOSS</b>			_____

## Claim for Exemption from Filing:

I am not required to complete the dollar amounts in Part III because:

\_\_\_\_\_ a. Property is 100% owner occupied.

\_\_\_\_\_ b. Property is a 4-family residence and 25% owner occupied.

\_\_\_\_\_ c. Property is not subject to this law. State Reason: \_\_\_\_\_

\*\*You may attach a copy of your financial statement but you must fill in the rental area and the number of units\*\*

Financial information and declaration must be completed. Failure to do so may invalidate this filing.

**COMPLETE REVERSE SIDE OF THIS FORM**

**Section IV: Expense Information (Cash Basis)**

	Expense (\$ per year)
A. Fuel	.....
B. Light & Power	.....
C. Cleaning	.....
D. Wages	.....
E. Repairs & Maintenance	.....
F. Management Administration	.....
G. Insurance (Annual)	.....
H. Water	.....
I. Advertising & Promotion	.....
J. Painting & Decorating	.....
K. Leasing Expense	.....
L. Misc. Expenses (itemize on separate sheet)	.....
<b>TOTAL EXPENSES BEFORE REAL ESTATE TAXES</b>	
M. Real Estate Taxes	.....
<b>TOTAL EXPENSES:</b>	

**Section V: Financing Information**

1st Mortgage Original Amount: \_\_\_\_\_ Year Began: \_\_\_\_\_ # of Years \_\_\_\_\_ Interest Rate: \_\_\_\_\_  
 2nd Mortgage Original Amount: \_\_\_\_\_ Year Began: \_\_\_\_\_ # of Years \_\_\_\_\_ Interest Rate: \_\_\_\_\_

**Section VI: Capital Improvements**

The following Capital Improvements were complete in the last fiscal year:

ITEM	COST OF THE IMPROVEMENT
_____	_____
_____	_____
_____	_____

Have any MCI increases been approved or applied for in the last 3 years?  
 Yes \_\_\_\_\_ No \_\_\_\_\_ **GRANTED?** Yes \_\_\_\_\_ No \_\_\_\_\_

**Section VII: Declaration**

I certify that all information contained on this statement is true and correct to the best of my knowledge and belief. I understand that the willful making of any false statement of material fact herein will subject me to the provisions of law relevant to the making and filing of false instrument and will render this statement null and void.

\_\_\_\_\_  
 Signature  
 \_\_\_\_\_  
 Print Name  
 \_\_\_\_\_  
 Title (Owner, Accountant, etc.)

§: State of New York, County of Greene

Before me came \_\_\_\_\_, to me known personally to have signed this form in my presence.

\_\_\_\_\_  
 Notary \_\_\_\_\_ Day of \_\_\_\_\_ 20\_\_\_\_

Affix Seal