

TOWN OF STONINGTON Annual Income and Expense Report

Return to:

Town of Stonington Department of Assessment 152 Elm St Stonington CT 06378 Tel: (860) 535-5098

Email: assessor@stonington-ct.gov

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|-------|-----|----|-----|
| April | 15. | 20 | 124 |

| Property Owner Name: Property Owner Mailing Address: |
|---|
| Property Location:Parcel Id: |
| FILING INSTRUCTIONS - Under current law, the Assessor's Office is required to reassess all real property in this municipality for the October 1, 2027 Grand List. In order to assess your real property fairly and equitably, information regarding the income and expenses related to your property is essential. Connecticut General Statutes, Section 12-63c requires owners of rental property to annually file the enclosed forms. Any information related to the actual rental and rental-related income and operating expenses shall not be a public record, and is not subject to the disclosure provisions of Connecticut General Statute Section 1-210 (Freedom of Information Act). |
| Please complete the enclosed forms and return them to this office on or before JUNE 3 rd . In accordance with Connecticut General Statute Section 12-63c(d), any owner of primarily rental real property who fails to file this form by June 3, 2024, or files an incomplete or false form with intent to defraud, shall be subject to a one-year penalty assessment equal to a ten percent (10%) increase in the assessed value of such property. Pursuant to CGS 12-63c upon determination that there is <i>good cause</i> , the assessor may grant an extension of not more than 30 days to submit such information, if the owner of such property files a request for an extension with the assessor not later than June 3 rd . |
| GENERAL INSTRUCTIONS - Each summary page should reflect information for a single property for the year of 2023. If you own more than one rental property, a separate report/form must be filed for each property in this jurisdiction. An income and expense report summary page and the appropriate income schedule must be completed for each rental property. Income Schedule A must be filed for apartment rental property and Schedule B must be filed for all other rental properties. |
| Complete this form for all rented or leased commercial, retail, industrial or mixed-use property. Identify the property and address. Provide Annual information for the Calendar Year 2023. TYPE/USE OF LEASE SPACE: Indicate what the leased space is being utilized for (i.e.: office, retail, warehouse, restaurant etc.). ESC/CAM/OVERAGE: Circle if applicable. ESCALATION: Amount, in dollars, of adjustment to base rent either pre-set or tied to the Inflation Index. CAM: Income received from common area charges to tenant for common area maintenance, or other income received from the common area property. OVERAGE: Additional fee or rental income. This is usually based on a percent of sales or income. PROPERTY EXPENSES & UTILITIES PAID BY TENANT: Indicate the property expenses & utilities the tenant is responsible for. Abbreviations may be used (<i>e.g.</i> , "RE" for real estate taxes & "E" for electricity). |
| WHO SHOULD FILE - All individuals and businesses receiving this form should complete and return this form to the Assessor's Office. If you believe that you are not required to fill out this form, please call the number listed above to discuss your special situation. All properties which are rented or leased, including commercial, retail, industrial and residential properties, except "such property used for residential purposes, containing not more than six dwelling units and in which the owner resides" must complete this form. If a property is partially owner-occupied, this report must still be filed. IF YOUR PROPERTY IS 100% OWNER OCCUPIED, OR 100% LEASED TO A RELATED CORPORATION, BUSINESS FAMILY MEMBER OR OTHER RELATED ENTITY, PLEASE INDICATE BY CHECKING THE FOLLOWING BOX: |

2023 ANNUAL INCOME AND EXPENSE REPORT SUMMARY Dept of Assessment Dept of Assessment 152 Elm St

| Owner | | | Property Name | | | Stonington CT 06378 |
|--|-----------|-----------|-----------------------|--|---------------|-----------------------------------|
| Mailing Address | | | Property Address | | | Phone: 860-535-5098 |
| City / State/ Zip | | | Parcel Id | | | Email: assessor@stonington-ct.gov |
| Filer Name | | | Owner Phone | Email | ail | |
| 1. Primary Property Use (Circle One) A. Apartment | B. Office | C. Retail | D. Mixed Use | E. Shopping Center | F. Industrial | G. Other |
| 2. Gross Building Area (Including Owner-Occupied Space) | | Sq. Ft. | 6. Number o | Number of Parking Spaces | | |
| 3. Net Leasable Area | | Sq. Ft. | 7. Actual Year Built | ar Built | | |
| 4. Owner-Occupied Area | | _ Sq. Ft. | 8. Year Remodeled | odeled | | |
| 5. No. of Units | | 1 | | | | |
| INCOME - 2023 | | | EXPEN | EXPENSES - 2023 | | |
| 9. Apartment Rental (From Schedule A) | | | 22. Heating/A | 22. Heating/Air Conditioning | | |
| 10. Office Rentals (From Schedule B) | | | 23. Electricity | | | |
| 11. Retail Rentals (From Schedule B) | | | 24. Other Utilities | ities | | |
| 12. Mixed Rentals (From Schedule B) | | | 25. Payroll (Ex | Payroll (Except management, repair & decorating) | rating) | |
| 13. Shopping Center Rentals (From Schedule B) | | | 26. Supplies | | | |
| 14. Industrial Rentals (From Schedule B) | | | 27. Management | ent | | |
| 15. Other Rentals (From Schedule B) | | | 28. Insurance | | | |
| 16. Parking Rentals | | | 29. Common | Common Area Maintenance | | |
| 17. Billboard / Antenna Rental Income | | | 30. Leasing Fe | Leasing Fees/Commissions/Advertising | gu | |
| 18. Other Property Income | | | 31. Legal and | Legal and Accounting | | |
| 19. TOTAL POTENTIAL INCOME (Add Line 9 Through Line 18) | (81 | | 32. Cleaning & | Cleaning & Maintenance | | |
| 20. Loss Due to Vacancy and Credit | | | 33. Security | | | |
| 21. EFFECTIVE ANNUAL INCOME (Line 19 Minus Line 20) | | | 34. General Repairs | epairs | | |
| | | | 35. Tenant Im | Tenant Improvements | | |
| | | | 36. Other (Specify) | oify)_ | | |
| Filer Signature Da | Date | | 37. TOTAL EX | 37. TOTAL EXPENSES (Add Lines 22 Through 36) | 136) | |
| | | | 38. NET OPER | 38. NET OPERATING INCOME (Line 21 Minus Line 37) | nus Line 37) | |
| Filer Phone Number Filer Email | | | 39. Capital Expenses | benses | | |
| | | | 40. Real Estate Taxes | e Taxes | | |

RETURN TO THE STONINGTON ASSESSOR'S OFFICE ON OR BEFORE JUNE 3, 2024 TO AVOID 10% PENALTY

42. Depreciation 43. Amortization

41. Mortgage Payment (Principal and Interest)

| SCHEDULE A - 2023 APARTMENT KENT SCHEDULE | 23 APAI | RIMENI | KEN | I SCHE | DULE | | Comple | te this Section | n for A | partment Reni | Complete this Section for Apartment Rental activity only. |
|---|-----------------|-----------------|------------|---------------|-------------|-------------------|--------------|---------------------|---------------|-------------------------|---|
| UNIT TYPE | No. of Units | UNITS | ROOM COUNT | COUNT | UNIT SIZE | MONTHLY | Y RENT | TYPICAL | | | |
| | TOTAL | RENTED | ROOMS | BATHS | SQ. FT | PER UNIT | TOTAL | LEASE TERM | Ñ | BUILDING FEA | BUILDING FEATURES INCLUDED IN |
| EFFICIENCY | | | | | | | | | | (Please Che | (Please Check All That Apply) |
| 1 Bedroom | | | | | | | | | | | |
| 2 Bedroom | | | | | | | | | | □ Heat | ☐ Garbage Dispos |
| 3 Bedroom | | | | | | | | | | ☐ Electricity | ☐ Furnished Unit |
| 4 Bedroom | | • | | | | | | | | ☐ Other Utilities | ☐ Security |
| OTHER RENTABLE UNITS | | | | | | | | | | ☐ Air Conditioning | g Pool |
| OWNER/MANAGER/JANITOR OCCUPIED | | | | | | | | | | ☐ Tennis Courts | |
| SUBTOTAL | | | | | | | | | | Stove/Refrigerator | |
| GARAGE/PARKING | | | | | | | | | |] [| .01 |
| OTHER INCOME (SPECIFY) | | | | | | | | | | ☐ Other Specify_ | |
| TOTALS | | | | | | | | | | | |
| SCHEDULE B - 2023 LESSEE RENT SCHEDULE | 23 LESS | EE REN | T SCH | EDULE | | Complete this | section for | r all other re | ntal act | ivities <u>except</u> (| Complete this section for all other rental activities <u>except</u> apartment rental. |
| NAME | LOCATION OF | TYPE/USE OF | USE | | LEASE TERM | 2 | | ANNUAL RENT | RENT | | PROPERTY EXPENSES & UTILITIES |
| TENANT | LEASED SPACE | LEASED SPACE | ED | START DATE | END DATE | LEASED SQ. FT. | BASE RENT | ESC/CAM/ OVERAGE | TOTAL RENT | RENT PER SQ. FT. | PAID BY TENANT |
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| TOTAL | | | | | | | | | | | |
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COPY AND ATTACH IF ADDITIONAL PAGES ARE NEEDED