



TOWN OF STONINGTON Annual Income and Expense Report

Return to:

Town of Stonington
Assessor's Office
152 Elm St
Stonington CT 06378
Tel: (860) 535-5098
Email: assessor@stonington-ct.gov

April 15, 2024

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 3rd. In accordance with Connecticut General Statute 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 *good cause*, 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 3rd.

GENERAL INSTRUCTIONS - Complete this form for all Mobile Home Park and related properties. Provide **Annual** information for the Calendar Year 2023.

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.

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.

THE ENCLOSED FORMS MUST SIGNED & RETURNED TO THE STONINGTON ASSESSMENT DEPT (FILINGS CAN BE BY EMAIL, MAIL, COURIER SERVICE, HAND DELIVERY TO THE ASSESSOR'S OFFICE OR PLACED IN THE DROP BOX TO THE LEFT OF THE FRONT DOOR OF TOWN HALL) ON OR BEFORE JUNE 3, 2024 OR BE SUBJECT TO THE TEN PERCENT (10%) PENALTY. A RESPONSE IS REQUIRED.

Town of Stonington Department of Assessment

152 Elm St, Stonington, CT 06378 * Telephone 860-535-5098 * Email assessor@stonington-ct.gov

**MOBILE HOME PARK
Income and Expense Survey for Calendar Year 2023
Due JUNE 3, 2024**

Information provided is CONFIDENTIAL, in accordance with Connecticut Law.

Parcel Id: _____
Property Owner: _____
Property Name: _____
Property Address: _____
Form Preparer/Title: _____
Telephone Number/Email: _____

Park Characteristics

Number of Sites: _____
Number of Apartments/Cottages: _____
Number of Leasable Mobile Homes: _____
Site/Pad Size: _____ Site/Pad Amenities: _____

Utilities Available: Electricity _____ (Yes or No)
Water _____ (Yes or No)
Gas _____ (Yes or No)

Annual Revenue

Site Rentals \$ _____
Mobile Home Rentals \$ _____
Apartment/Cottage Rentals \$ _____
Gas/Oil Sales & Contracts \$ _____
Storage/Hauling \$ _____
Repair Service \$ _____
Laundry \$ _____
Utility Charge \$ _____
Other Income \$ _____

Total Gross Income \$ _____

2023 Vacancy Rate / Credit Losses \$ _____

Effective Gross Income \$ _____

Annual Operating Expenses

Fixed Expenses

Real Estate Taxes	\$ _____
Personal Property Taxes	\$ _____
Rent: Equipment	\$ _____
Insurance	\$ _____
Other _____	\$ _____

Total Fixed Expenses	\$ _____
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Variable Expenses

Owners Salary/Management Fees	\$ _____
Administrative (Salaries, Payroll, etc.)	\$ _____
Professional (Legal, Accounting, etc.)	\$ _____
Eviction Expenses	\$ _____
Repairs/Maintenance	\$ _____
Utilities (heat, light, gas)	\$ _____
Trash Removal	\$ _____
Grounds Maintenance, Snow Removal	\$ _____
Sales/Marketing	\$ _____
Oil/Gas	\$ _____
Other _____	\$ _____

Total Variable Expenses	\$ _____
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Total Operating Expenses (Fixed added to Variable)	\$ _____
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Net Operating Income (Effective Gross Income, less Total Operating Expenses)	\$ _____
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Do any of the figures include capital expenditures or extraordinary costs that vary from typical yearly operating expenses? If yes, please explain:

Please provide comments, clarifications or additional information (attach, if necessary)

_____ Signature/Title	/	_____ Date
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_____ Name (print)	/	_____ Telephone	/	_____ Email
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