



Official Request
RETAIL PROPERTY
INCOME & EXPENSE SURVEY
San Patricio County Appraisal District
361-364-5402

This form is accessible via the San Patricio County Appraisal District's website at www.sanpatcad.org
If you wish, you may download the form and enter the data via the fillable PDF and submit electronically to PublicInfoRequest@sanpatcad.org

Date: _____

Property Owner Name _____
Mailing Address _____

Re: Property ID _____

The San Patricio County Appraisal District is in the process of collecting and analyzing information for the reassessment of Warehouse, Industrial, and Storage Property for the calendar year 2021. ***This request is pursuant to the Texas Property Tax Code: Sec.23.01, 23.0101, 23.011, 23.012.*** Please furnish this office with income and expense data for any income producing properties for calendar year 2021. This request for information will be kept strictly **confidential under the stipulation of Sec. 22.27 of the Texas Property Tax Code.**

This survey form is to be completed by the property owner or a duly authorized agent, showing the gross income (at 100% occupancy), vacancies and expenses for the above referenced property. The information should encompass the 2020 calendar year.

In addition to the information requested as part of this survey, we request that you submit any other income or expense information that you believe to be relevant to the assessment of your property. If the property is 100% owner occupied, and therefore not income producing, please state this in writing on the front of the form and return it to our office.

The enclosed self-addressed envelope is provided for your convenience. The income information must be returned to this office no later than **February 19, 2021** or postmarked by the U.S. Postal Service no later than **February 19, 2021.**

If you have any questions regarding this matter, or wish to discuss this request form with a member of our Commercial appraisal staff, please call between 8:00a.m. and 5:00p.m., Monday through Friday. ***Your cooperation and timely response to this requirement will be greatly appreciated.***

Sincerely,
Robert Cenci RPA, Chief Appraiser
Enclosure

Retail Property Income & Expense Survey

The Income and Expense Information must be placed on this form. No Alternative forms may be used. If you should have questions or need assistance, please call our office at 361-364-5402.

CERTIFICATION

State law requires certification by the owner or officially authorized representative. Please type or print all information except signature.

Name of building _____

Property address _____

Type of project or building _____

Owners(s) names(s) _____

All information including the accompanying schedules and statements have been examined by me and to the best of my knowledge and belief are true, correct, and complete.

Management firm _____	Phone _____
Address _____	
Date _____	Signature _____ Title _____
Print Name _____	E-mail _____

A. BUILDING INFORMATION

1. Estimate of Net Leasable Area (NLA) _____ (Sq. ft.)
2. Number of Stories _____ (Sq. ft.)
3. Below Grade Space _____ (Sq. ft.)

B. PHYSICAL VACANCY INFORMATION

1. Space Vacant January 1 (2020) _____ (Sq. ft. rentable)
2. Space Vacant January 1 (2021) _____ (Sq. ft. rentable)

C. ASKING RENT INFORMATION

1. Current ASKING rent per sq. ft. for vacant space → _____

D. Has there been a professional appraisal on this real property in the last five years? Yes No *If yes, appraiser's estimate of value \$ _____ Date of Value _____*

E. ANNUAL INCOME (for calendar year 2020) - Please provide a copy of the rent roll, if applicable.

- | | |
|--|--|
| 1. Potential Rental Income ▶ | |
| 2. Sales of Utilities/Services ▶ | |
| 3. Rental Income: (Specify) ▶ | |
| 4. Income Loss from Vacancy 2020 ▶ | |
| 5. Income Loss from Bad Debt 2020 ▶ | |
| 6. Actual Rental Income Received ▶ | |
| OTHER INCOME | |
| 7. Common Area Maintenance Reimbursement ▶ | |
| 8. Interest Income ▶ | |
| 9. Insurance Reimbursement ▶ | |
| 10. Operating Expense Reimbursement ▶ | |
| 11. Tax Escalation or Reimbursement ▶ | |
| 12. Parking and Special Areas ▶ | |
| 13. Other Rental Income ▶ | |
| 14. Miscellaneous (Specify) ▶ | |

- 15. Miscellaneous (Specify) ▶ _____
- 16. Miscellaneous (Specify) ▶ _____
- 17. Total Other Income (Sum of lines 7 through 16) ▶ _____
- 18. TOTAL ACTUAL INCOME (Sum of lines 6 and 17) ▶ _____

F. CAPITAL IMPROVEMENTS, RENOVATIONS

Have there been Capital Improvements or Capital Renovations to the property during this reporting period?
Yes No If yes, please provide total cost here and attach a detailed list on a separate page.

G. ANNUAL OPERATING EXPENSES Utilities:

- 19. Water and Sewer → _____
- 20. Electricity (Excludes HVAC) → _____
- 21. Primary Heating Fuel (Specify) → _____
- 22. Other Fuel (Specify) → _____
- TOTAL UTILITIES → _____

H. MAINTENANCE AND REPAIRS (Excluding Capital Expenditures or Tenant Improvements)

- 23. Maintenance Payroll (Including Payroll Taxes and Benefits) ▶ _____
- 24. HVAC Repairs ▶ _____
- 25. Electric/Plumbing Repairs ▶ _____
- 26. Elevator Repairs ▶ _____
- 27. Roof Repairs ▶ _____
- 28. Other Common Area or Exterior Repairs ▶ _____
- 29. Miscellaneous Repairs (Specify) ▶ _____
- TOTAL MAINTENANCE & REPAIRS ▶ _____

I. MANAGEMENT AND ADMINISTRATIVE:

- 30. Management Fees ▶ _____
- 31. Other Administrative/Payroll (Including Payroll Taxes and Benefits) ▶ _____
- 32. Leasing Fees ▶ _____
- TOTAL MANAGEMENT AND ADMINISTRATIVE ▶ _____

SERVICES:

- 33. Janitorial/Cleaning (Payroll/Contract) ▶ _____
- 34. Landscape (Grounds Maintenance) ▶ _____
- 35. Trash ▶ _____
- 36. Security ▶ _____
- 37. Snow Removal ▶ _____
- TOTAL MANAGEMENT AND ADMINISTRATIVE ▶ _____

J. INSURANCE AND TAXES (Excluding Payroll Taxes):

- 38. Insurance, Fire, Casualty (One Year) ▶ _____
- 39. Other Taxes, Fees ▶ _____
- 40. Real Estate Taxes ▶ _____
- TOTAL INSURANCE AND TAXES ▶ _____

K. TOTAL OPERATING EXPENSES:

- 41. Total Expense ▶ _____

NET OPERATING INCOME ▶ _____