

**Town of Groton Assessor's Office
 Mobile Home Park
 Income and Expense Survey for Calendar Year 2019
 Due June 1, 2020**

Information provided is CONFIDENTIAL, in accordance with Connecticut Law.

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

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 \$ _____

 2019 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 \$ _____

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 \$ _____

Total Operating Expenses \$ _____
(Fixed added to Variable)

Net Operating Income \$ _____
(Effective Gross Income less Total Operating Expenses)

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

_____/_____
Name (print) Telephone