HUDSON COUNTY BD OF TAXATION
HUDSON COUNTY PLAZA
257 CORNELISON AVENUE 3rd Floor
JERSEY CITY, NEW JERSEY 07302
201-395-6260 FAX 201-395-6263

STATEMENT OF INCOME AND EXPENSE

(to be filed with each appeal on income producing property)

To be reported for your last fiscal year ending October 1, 19____

_____
Name of Owner

_____
Address

_____
City

Taxing District _____

Block # _____ Lot # _____

Address _____

Estimated age of Property _____ years

Estimated remaining economic life of property _____ years

INCOME

Itemize income for each individual apartment, store or rentable space of any kind, the gross annual rent from leases entered into and assigning reasonable rent to unoccupied and non-rented spaces and so indicate:

_____ @ _____ $ _____
_____ @ _____ $ _____
_____ @ _____ $ _____
_____ @ _____ $ _____
_____ @ _____ $ _____
_____ @ _____ $ _____
_____ @ _____ $ _____
_____ @ _____ $ _____
_____ @ _____ $ _____
_____ @ _____ $ _____
_____ @ _____ $ _____
Other Income @ _____ $ _____

Total Gross Income per month $ _____

TOTAL GROSS ANNUAL INCOME $ _____

Actual Rent Loss by Reason of Vacancies for past 12 months $ _____

ACTUAL RENTAL INCOME FOR LAST FISCAL YEAR $ _____

Reserve for Replacement

Item	Est. Life	Annual Reserve
		$
		$
		$
		$
		$
		$
		$
		$
		$
		$
		$
Total Reserve for Replacement		$

EXPENSES

OPERATING EXPENSE

Management _____ % $ _____
Fuel _____ $ _____
Electricity & Gas Public Area & Oil Burner _____ $ _____
Water _____ $ _____
Superintendent - Apartment _____ $ _____
Salary _____ $ _____
Other Wages _____ $ _____
F.I.C.A. and other Employee Taxes $ _____
Painting & Decorating _____ $ _____
Repairs & Maintenance (Explain below) _____ $ _____
Reserve for Replacements (Itemize on table) _____ $ _____
Miscellaneous _____ $ _____
TOTAL OPERATING EXPENSE _____ $ _____

FIXED CHARGES

Insurance (Annual Basis) _____ $ _____
Taxes _____ $ _____
Owners Share $ _____
Tenants Share $ _____
Mortgage (Interest) _____ $ _____
(Principal) _____ $ _____
Depreciation _____ % $ _____
Other (Explain below) _____ $ _____
TOTAL FIXED CHARGES _____ $ _____
TOTAL EXPENSE _____ $ _____

REMARKS _____

USE ADDITIONAL SHEETS IF NECESSARY

Amount of Mortgage _____
Date of Mortgage _____
Terms of Mortgage _____

I hereby certify that the information furnished hereon, or attached hereto is correct and full statement of the above captioned property, to the best of my knowledge and belief.

Subscribed and sworn before me this _____

day of _____
(Month) (Year)

at _____
(City or Town)

_____
(Notary Public)

_____
(Owner, Agent, Officer, Accountant, etc.)

PHOTOSTATIC COPIES OF LEASES MUST BE SUBMITTED WITH THIS PETITION. IF NOT, PERTINENT CONDITIONS OF THE LEASE/LEASES WILL BE ACCEPTED

ATTACH THIS STATEMENT TO PETITION OF APPEAL FORM AND COPY TO TAXING DISTRICT