



## Mobile Home/RV Park Income and Expense Reporting Form

### Property Information

Property Owner \_\_\_\_\_ Geocode \_\_\_\_\_

Property Address \_\_\_\_\_ Doing Business As (DBA) or  
Building Name \_\_\_\_\_

Mailing Address \_\_\_\_\_

### Income and Expense Data

**Rents received as of 12/31/** \_\_\_\_\_ **Please round to nearest dollar**

1. Mobile home spaces .....	\$	
2. RV spaces .....	\$	
3. Tent sites .....	\$	
4. Cabins .....	\$	
5. Storage rentals .....	\$	
6. Boat storage rentals .....	\$	
7. Other rentals .....	\$	
8. Loss due to vacancy and/or collection .....	\$	
9. Other income and reimbursements .....	\$	

### Expenses

10. Advertising .....	\$	
11. Cleaning .....	\$	
12. Commissions .....	\$	
13. Insurance .....	\$	
14. Legal and accounting fees .....	\$	
15. Management (cost of administering the leases) .....	\$	
16. Repairs .....	\$	
17. Supplies .....	\$	
18. Property taxes .....	\$	
19. Utilities .....	\$	
20. Other (describe) _____	\$	
21. Payroll assoc. with property (except management) .....	\$	
22. Snow/trash removal and landscape maintenance .....	\$	
23. Maintenance (describe) _____	\$	
_____	\$	
24. Reserves for replacement .....	\$	
25. Security .....	\$	

### Signature

Signature of Owner or Preparer	Date	SSN or FEIN
Print Name and Title	Contact Phone Number	
Email Address		

## Income and Expense Data (continued)

Project Amenities (Check any that may apply.)			
<input type="checkbox"/> Swimming pool	<input type="checkbox"/> Sauna/hot tub	<input type="checkbox"/> On-site office	<input type="checkbox"/> RV waste disposal
<input type="checkbox"/> Tennis courts	<input type="checkbox"/> Shower facilities	<input type="checkbox"/> Guest laundry	<input type="checkbox"/> Night lights
<input type="checkbox"/> Clubhouse	<input type="checkbox"/> Storage	<input type="checkbox"/> Convenience store	<input type="checkbox"/> Heated units
<input type="checkbox"/> Exercise room	<input type="checkbox"/> Game room		

Total Sites Available For Rent	
_____ Mobile	_____ Travel trailer
_____ Tent	_____ Cabin
_____ Boat storage	_____ Parking space
Normal operating period _____ Year around	_____ Months

Monthly Market Rent Schedule - Market rent is the rent currently required if the property/unit were vacant.			
_____ Mobile home spaces	@ \$ _____	_____ RV spaces	@ \$ _____
_____ Mobile home spaces	@ \$ _____	_____ RV spaces	@ \$ _____
_____ Mobile home spaces	@ \$ _____	_____ RV spaces	@ \$ _____
_____ Tent sites	@ \$ _____	_____ Cabins	@ \$ _____
_____ Boat storage	@ \$ _____	_____ Parking spaces	@ \$ _____

Expense Responsibilities							
	Owner	Tenant	Shared		Owner	Tenant	Shared
Cleaning	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Cable TV	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Trash removal	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Electric	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Building maintenance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Gas	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Parking lot maintenance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Water	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please be advised that you are required to report if you have business equipment with a market value of \$100,000 or more. If you have or have recently acquired business equipment with a market value that exceeds \$100,000, please check the box below to receive a business equipment reporting form if one has not already been provided to you.

Please send me a business equipment reporting form.