MOBILE HOME / RV PARK INCOME AND EXPENSE SURVEY

<u>Confidential Information Per F.S. 195.027 For Use By Osceola County Property Appraiser's Office Only</u>

Park name: _____

Park addr: _____

2020 GROSS INCOME		Income Data for January 1, 2020 thru December 31, 2020		
Attach complete Profit & Loss Statement and Rent Roll as of 1/1/2021				
Type of Lot	# of Units	Monthly Rent	Income / year	Utilities included in rent. (circle)
Mobile Home - Standard				
Mobile Home - Premium				Electric
Park Owned Home*				Sewer
RV - Standard				Water
RV - Premium				Cable TV
Tent Site				Phone
Cabin				Internet
Storage Lots				

*Provide detailed list of Park Owned Homes including location within the park

Total 2020 Gross Rental Income : $ _____

Rent Concessions: $ - _____

Vacancy and Collection Loss: _____ % $ - _____

Other Income: Laundry, vending, etc $ + _____

<u>Total 2020 Actual Income Received</u> $ _____

2020 OPERATING EXPENSES	Expense Data for January 1, 2020 thru December 31, 2020
Management Fees	$ - _____
Payroll	$ - _____
Insurance (Building & Content)	$ - _____
Insurance (Employee, other)	$ - _____
Utilities (Electric, Phone, Cable, etc)	$ - _____
Office Expense, Supplies, etc.	$ - _____
Professional Fees (Accounting, Advertising, Legal, etc.)	$ - _____
Services (Grounds Maintenance, Pool, Garbage, etc)	$ - _____
Repairs & Maintenance	$ - _____
Non Ad Valorem Assessments	$ - _____
Reserves for Replacements	$ - _____
Other (specify) _____	$ - _____

<u>Total 2020 Operating Expenses</u>   _____

2020 Net Operating Income (before taxes, cap.improv. & other exp.)   _____

2020 CAPITAL EXPENSES	Expense Data for January 1, 2020 thru December 31, 2020

Please specify improvement. Do not include in operating expenses above

_____ $ _____   _____ $ _____

_____ $ _____   _____ $ _____

Prepared by:_____ Title: _____ Date: _____

Signature:_____ Phone # : _____

* Please attach additional pages as necessary.   E-mail : _____

COVID -19 INFORMATION

Did you receive any subsidy for Covid -19 relief?   _____

Did you include any subsidy in your reported revenue?   _____

If so, please state the amount $ _____

Did you make any rent concessions or modifications?   _____

If so, what were the terms?_____

_____

Did you experience any vacancies directly related to Covid-19?_____

_____

Please attach any additional information that you feel is relevant.

RETURN BY APRIL 1, 2021