MOBILE HOME PARK QUESTIONNAIRE

INCOME QUESTIONNAIRE FOR THE 36 MONTHS FROM: 2016 TO 2018

NAME AND LOCATION OF PROPERTY **OWNER AND ADDRESS OF RECORD**

CHECK SERVICES & UTILITIES INCLUDED RENT: ( ) WATER ( ) SEPTIC ( ) CABLE TV ( ) LAUNDRY
( ) YARD MAINTENANCE ( ) OFF-ROAD PARKING
( ) PATIO REPAIR SERVICE

OTHER (LIST) _____

NUMBER OF SPACES AVAILABLE: _____ **NUMBER OF SPACES OCCUPIED:** _____

RENT RAGE: $_____ TO $_____ PER MONTH

LEASE TERM (# OF EACH): ANNUAL _____ SEMI-ANNUAL _____ MONTHLY _____

NUMBER OF NEW TENANTS THIS YEAR: _____

ANNUAL INCOME:	2016	2017	2018
1. TRAILER SPACE - 100% OCCUPANCY	$_____	$_____	$_____
2. SPACES FOR OWNER, MANAGER, ETC.	$_____	$_____	$_____
3. APARTMENT RENTAL – 100% OCCUPANCY	$_____	$_____	$_____
4. LOSS DUE TO VACANCY OR DELINQUENCY	$_____	$_____	$_____
5. TOTAL INCOME	$_____	$_____	$_____
EXPENSES:			
1. PAYROLL (EXCEPT MANAGER, REPAIR)	$_____	$_____	$_____
2. SUPPLIES (JANITOR, BULBS, ETC.)	$_____	$_____	$_____
3. ELECTRICITY	$_____	$_____	$_____
4. WATER/SEWER	$_____	$_____	$_____
5. FUEL (TYPE OF FUEL_____)	$_____	$_____	$_____
6. MANAGEMENT FEES/WAGES	$_____	$_____	$_____
7. COMMON AREA MAINTENANCE	$_____	$_____	$_____
8. ADMINISTRATIVE COST (LIST)	$_____	$_____	$_____
9. MAINTENANCE & REPAIRS (LIST)	$_____	$_____	$_____
10. REAL ESTATE TAX	$_____	$_____	$_____
11. MORTGAGE PAYMENT	$_____	$_____	$_____
12. EXCISE TAX	$_____	$_____	$_____
13. TOTAL EXPENSES (Lines 1-12)	$_____	$_____	$_____

MORTGAGE/SALES INFORMATION:

1. **IS THERE A CURRENT MORTGAGE ON THIS PROPERTY?** ( ) YES ( ) NO

2. **IF YES, PLEASE PROVIDE THE FOLLOWING DATA**

_____	_____	_____	_____
NAME OF MORTGAGE			MORTGAGE AMOUNT
INTEREST RATE	TERM OF MORTGAGE	DATE 1ST PAYMENT	MONTHLY PAYMENT

3. **PLEASE PROVIDE:** DATE PURCHASED_____ CONSIDERATION_____

I DECLARE, UNDER THE PENALTIES OF PERJURY, THAT THE CONTENTS OF THIS FORM AND ALL THE ACCOMPANYING SCHEDULES AND STATEMENTS HAVE BEEN EXAMINED BY ME AND ARE TRUE, CORRECT, AND COMPLETE TO THE BEST OF MY KNOWLEDGE, INFORMATION, AND BELIEF.

_____	_____	_____
OWNER'S SIGNATURE	TITLE OF SIGNER	DATE
_____	_____	
PRINT/TYPE NAME OF SIGNER	PHONE NUMBER	