



STATE OF FLORIDA  
**LEE COUNTY PROPERTY APPRAISER**  
KENNETH M. WILKINSON, C.F.A.



**Mailing Address:**  
P.O. Box 1546  
Fort Myers, Florida 33902-1546  
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**Physical Address:**  
2480 Thompson Street  
Fort Myers, Florida 33901-3074  
**Facsimile:** (239) 533-6091  
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**RETAIL CONDOMINIUM (DOR 1104 NOI)**  
**Income & Expense Questionnaire**

It is my responsibility as your Lee County Property Appraiser to annually determine the market value of all property in our county. In order to accurately appraise income-driven properties, this office requests information to help us identify current rental conditions.

**All information that you submit in response to this questionnaire will be held in strict confidence, as mandated by Florida Statute 195.027.**

The information generated by this survey will be used to develop *TYPICAL* income and operating expense parameters for the various types of properties reporting. If you provide verifiable year-end 2011 income and expense data, it will be one of the many factors considered in preparing your 2012 assessment. If you fail to respond, however, the Lee County Property Appraiser will be required to assess your property utilizing market parameters from similar properties responding to this survey. **Failure to submit the requested income data by April 30<sup>th</sup>, 2012 will preclude the Lee County Property Appraiser from considering the income data for the current tax year and it will be objected to if offered in a subsequent administrative or judicial proceeding.**

If you would like assistance in completing the *income questionnaire*, you may contact:  
**JUDY FARRINGTON** at (239) 533-6201 or e-mail **FarringtonJ@Leepa.org** of the Commercial Department.

Thank you in advance for your anticipated cooperation.

Respectfully requested,

A handwritten signature in black ink that reads "K. M. Wilkinson".

Kenneth M. Wilkinson, C.F.A.  
Lee County Property Appraiser

**RETAIL CONDOMINIUM (DOR 1104 NOI)**  
INCOME AND EXPENSE QUESTIONNAIRE  
FOR PERIOD BEGINNING **01-01-11** AND ENDING **12-31-11**  
PLEASE RESPOND BY **APRIL 30, 2012**

STRAP: \_\_\_\_\_ OWNER NAME: \_\_\_\_\_

SITE ADDRESS: \_\_\_\_\_

NAME OF THE COMPLEX: \_\_\_\_\_

Is the property 'Owner-Occupied'?

**YES** \_\_\_\_\_ It is not necessary to submit additional information at this time, please sign, date and return the form in the postage paid envelope.

**NO** \_\_\_\_\_ Please fill out the form below and provide any additional information requested. When complete, sign, date and return this form in the postage paid envelope.

THE PROPERTY APPRAISER IS REQUESTING THE FOLLOWING INFORMATION

- 1. A COMPLETE RENT ROLL AS OF **JANUARY 1, 2012** INDICATING:
  - a. TOTAL LEASABLE AREA (INCLUDE ALL VACANT AREAS) \_\_\_\_\_ SF
  - b. BASE MINIMUM RENT PER SQUARE FOOT \$ \_\_\_\_\_
  - c. ADDITIONAL RENT PER SQUARE FOOT FOR OTHER CHARGES \$ \_\_\_\_\_  
(COMMON AREA MAINTENANCE, INSURANCE, REAL ESTATE TAX)
  - d. BEGINNING & EXPIRATION DATES OF THE LEASES
- 2. ANNUAL PERCENTAGE OF VACANCY & COLLECTION LOSS: \_\_\_\_\_ %
- 3. **PROFIT & LOSS STATEMENT** OF THE SUBJECT PROPERTY
  - a. *The statement submitted should be representative of all income & expenses associated with the performance during 01-01-11 to 12-31-11*
- 4. TOTAL INCOME FROM ALL SOURCES: \$ \_\_\_\_\_

**Expenses**

UTILITIES	\$ _____	PROPERTY INSURANCE	\$ _____
MANAGEMENT FEES	\$ _____	MAINTENANCE & REPAIRS	\$ _____
SALARIES	\$ _____	ADVERTISING / MARKETING	\$ _____
SUPPLIES	\$ _____	RESERVES FOR REPLACEMENTS	\$ _____
		(*SPECIFY*)	

\*Please specify what is included in the **RESERVES FOR REPLACEMENTS** expense category. Failure to specify this item may exclude those expenses from being considered.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

ARE RENTAL CONCESSIONS BEING OFFERED: Yes \_\_\_\_\_ No \_\_\_\_\_

IF YES, PLEASE EXPLAIN: \_\_\_\_\_

COMPLETED BY: \_\_\_\_\_ DATE: \_\_\_\_/\_\_\_\_/\_\_\_\_ PHONE: ( ) \_\_\_\_\_

If you wish to supply the requested data in another format (i.e., year end income and expense statement, profit & loss or operating statement, etc.) please attach it to this form and return it to our office at your earliest convenience.