

SCHEDULE C: Mixed Use Rental Income

Property Location:	Mixed Use Property	Calendar Year:
Assessing Parcel ID:	Rental Income Statement	Submitted By:

Commercial Lease : Please provide information on current leases as of January 1st.					Lease Terms			
Floor Level	Tenant Name	Type of Space	Leased Area (Sq. ft.)	Rent per SF on Jan. 1st	Annual Rent	Start Date (Mo/Yr)	Term in years	Basis Gross, Net, NNN
				\$	\$			
				\$	\$			
				\$	\$			
				\$	\$			
				\$	\$			

Residential Rental Information: Please provide the following rental information:

Unit Type	No. of Units	Room Count		Monthly Rent		Typical Lease Term	Includes the following:
	Total	Rooms	Bath-room	Per Unit	Total	Lease or Tenant at Will (TAW)	W: Water Sewer E: Electricity Heat: Oil/Gas/Elec Other: Explain
Studio							
1 Bedroom							
2 Bedroom							
3 Bedroom							
4 Bedroom							
Garage Parking Space							
Outdoor Parking Space							

COPY AND ATTACH ADDITIONAL PAGES (IF NEEDED)