

# Property Performance Survey

CRE Property : Professional Office PID: \_\_\_\_\_ Situs: \_\_\_\_\_

## Operating Statement for 2021

### Property Configuration:

Total # of Leasable Units: \_\_\_\_\_ Total # Vacant Units, if any: \_\_\_\_\_

### Lease Information:

Typical Lease Duration: \_\_\_\_\_ YEAR(s) Typical Lease Rate Terms: Gross NNN

Rental Rate Trends: Increasing Decreasing Stable

### Recent Leases (*disregard if rent roll provided*):

Please indicate lease(s) that began during the 2021 calendar year, if any.

Size of suite: \_\_\_\_\_ Length: \_\_\_\_\_ Rental Rate: \_\_\_\_\_ Base or NNN

Size of suite: \_\_\_\_\_ Length: \_\_\_\_\_ Rental Rate: \_\_\_\_\_ Base or NNN

### INCOME:

Gross Rental Revenue @ 100% Occupancy: \$ \_\_\_\_\_

Actual Rental Revenue: \$ \_\_\_\_\_

Other Income Sources (taxes, insurance, CAM, etc..) \$ \_\_\_\_\_

**Total Actual Revenue:** \$ \_\_\_\_\_

### EXPENSES:

Management: \$ \_\_\_\_\_

Insurance (property insurance only) \$ \_\_\_\_\_

Administrative \$ \_\_\_\_\_

Repairs and Maintenance \$ \_\_\_\_\_

Contract Services \$ \_\_\_\_\_

Utilities \$ \_\_\_\_\_

Other \$ \_\_\_\_\_

\*Excluding debt services, interest, depreciation, and property taxes\*

Allowance for replacements, if any \$ \_\_\_\_\_

**Total Expenses:** \$ \_\_\_\_\_

Additional comments/information: \_\_\_\_\_

If further clarification is needed, may we contact you? YES NO Method of contact:  
Email Phone

Date: \_\_\_\_\_ Contact Information: \_\_\_\_\_

Printed Name: \_\_\_\_\_ *I respectfully decline to participate at this time.*

Signature: \_\_\_\_\_

# Property Performance Survey

CRE Property : Self-Storage Facility PID: \_\_\_\_\_ Situs: \_\_\_\_\_

## Operating Statement for 2021

### Property Configuration:

Total # of Storage Units - Non- Climate controlled (NCC): \_\_\_\_\_

Total # of Storage Units - Clime Controlled (CC), if any: \_\_\_\_\_

Total # of Parking Spaces: \_\_\_\_\_

### Lease Tate Information - NCC/CC (at time of survey):

5X5 \$\_\_\_\_\_/\_\_\_\_\_ Per Month      5X10 \$\_\_\_\_\_/\_\_\_\_\_ Per month      10X10 \$\_\_\_\_\_/\_\_\_\_\_ Per Month

10X15 \$\_\_\_\_\_/\_\_\_\_\_ Per Month      10X20 \$\_\_\_\_\_/\_\_\_\_\_ Per Month      10X30 \$\_\_\_\_\_/\_\_\_\_\_ Per Month

Other Unit Size (Please specify size, type, and rate): \_\_\_\_\_ NCC/CC: \$\_\_\_\_\_ Per Month

Parking Spaces (Please specify, size, type, and rate): \_\_\_\_\_ Opened/Closed: \$\_\_\_\_\_ Per Month

### INCOME: (January 1 thru December 31, 2021)

Annual Gross Rental Revenue @ 100% Occupancy \$ \_\_\_\_\_

Annual Occupancy in 2021 \_\_\_\_\_% \$ \_\_\_\_\_

Actual Rental Revenue \$ \_\_\_\_\_

Other Income Sources (Example: Parking) \$ \_\_\_\_\_

**Total Actual Revenue:** \$ \_\_\_\_\_

### EXPENSES: (January 1 thru December 31, 2021)

Management: \$ \_\_\_\_\_

Insurance (property insurance only) \$ \_\_\_\_\_

Repairs and Maintenance \$ \_\_\_\_\_

Contract Services \$ \_\_\_\_\_

Utilities \$ \_\_\_\_\_

Other \$ \_\_\_\_\_

\*Excluding debt services, interest, depreciation, and property taxes\*

Allowance for replacements, if any \$ \_\_\_\_\_

**Total Expenses:** \$ \_\_\_\_\_

Additional comments/information: \_\_\_\_\_

If further clarification is needed, may we contact you?      YES      NO      Method of contact:  
Email      Phone

Date: \_\_\_\_\_ Contact Information: \_\_\_\_\_

Printed Name: \_\_\_\_\_  I respectfully decline to participate at this time.

Signature: \_\_\_\_\_

# Property Performance Survey

CRE Property : Industrial PID: \_\_\_\_\_ Situs: \_\_\_\_\_

## Operating Statement for 2021

### Occupancy:

Owner: \_\_\_\_\_ Tenant(s): \_\_\_\_\_

### Property Configuration:

Total # of Leasable Unites \_\_\_\_\_ # Vacant Units \_\_\_\_\_

**Lease Information:**  Check Box if property is owner occupied and skip to expenses section below

Typical Lease Duration: \_\_\_\_\_ Year(s) Typical Lease Rate Terns: Gross NNN

Rental Rate Trends: Increasing Decreasing Stable

### INCOME:

Gross Rental Revenue @ 100% Occupancy: \$ \_\_\_\_\_

Actual Rental Revenue: \$ \_\_\_\_\_

Other Income Sources (taxes, insurance, CAM, etc..) \$ \_\_\_\_\_

**Total Actual Revenue:** \$ \_\_\_\_\_

### EXPENSES:

Management: \$ \_\_\_\_\_

Insurance (property insurance only) \$ \_\_\_\_\_

Administrative \$ \_\_\_\_\_

Repairs and Maintenance \$ \_\_\_\_\_

Contract Services \$ \_\_\_\_\_

Utilities \$ \_\_\_\_\_

Other \$ \_\_\_\_\_

*\*Excluding debt services, interest, depreciation, and property taxes\**

Allowance for replacements, if any \$ \_\_\_\_\_

**Total Expenses:** \$ \_\_\_\_\_

Additional comments/information: \_\_\_\_\_

If further clarification is needed, may we contact you? YES NO Method of contact:  
Email Phone

Date: \_\_\_\_\_ Contact Information: \_\_\_\_\_

Printed Name: \_\_\_\_\_  I respectfully decline to participate at this time.

Signature: \_\_\_\_\_

## Property Performance Survey

**CRE Property :** Mobile Home Park or RV Park      **PID:** \_\_\_\_\_      **Situs:** \_\_\_\_\_

**Operating Statement for 2021**

**Property Configuration:**

Total # of Pad Sites: \_\_\_\_\_      Total # of Vacant (*at time of survey*): \_\_\_\_\_

*RV Park Specific:*

Total # of 30 AMP Serviced Pad Sites: \_\_\_\_\_

Total # of 50 AMP Serviced Pad Sites: \_\_\_\_\_

**Lease Information:**

Pad Site Rental Rates (*at time of survey*): Mobile Home: \_\_\_\_\_ RV (30AMP): \_\_\_\_\_ RV (50AMP): \_\_\_\_\_

Rental Rate Trends (*Please Circle one*):      Increasing      Decreasing      Stable

**INCOME:**

Gross Rental Revenue @ 100% Occupancy:      \$ \_\_\_\_\_

Actual Rental Revenue:      \$ \_\_\_\_\_

Other Income Sources (taxes, insurance, CAM, ect.)      \$ \_\_\_\_\_

**Total Actual Revenue:**      \$ \_\_\_\_\_

**EXPENSES:**

Management:      \$ \_\_\_\_\_

Insurance (property insurance only)      \$ \_\_\_\_\_

Administrative      \$ \_\_\_\_\_

Repairs and Maintenance      \$ \_\_\_\_\_

Contract Services      \$ \_\_\_\_\_

Utilities      \$ \_\_\_\_\_

Other      \$ \_\_\_\_\_

\*Excluding debt services, interest, depreciation, and property taxes\*

Allowance for replacements, if any      \$ \_\_\_\_\_

**Total Expenses:**      \$ \_\_\_\_\_

Additional comments/information: \_\_\_\_\_

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If further clarification is needed, may we contact you?      **YES**      **NO**      Method of contact:      **Phone**      **Email**

Date: \_\_\_\_\_      Contact Information: \_\_\_\_\_

Printed Name: \_\_\_\_\_      *I respectfully decline to participate at this time.*

Signature: \_\_\_\_\_

# Property Performance Survey

CRE Property : Retail Center PID: \_\_\_\_\_ Situs: \_\_\_\_\_

## Operating Statement for 2021

### Property Configuration:

Total # of Leasable Units: \_\_\_\_\_ Total # Vacant Units, if any: \_\_\_\_\_

### Lease Information:

Typical Lease Duration: \_\_\_\_\_ YEAR(s) Typical Lease Rate Terms: Gross NNN

Rental Rate Trends: Increasing Decreasing Stable

### Recent Leases (*disregard if rent roll provided*):

Please indicate lease(s) that began during the 2021 calendar year, if any.

Size of suite: \_\_\_\_\_ Length: \_\_\_\_\_ Rental Rate: \_\_\_\_\_ Base or NNN

Size of suite: \_\_\_\_\_ Length: \_\_\_\_\_ Rental Rate: \_\_\_\_\_ Base or NNN

### INCOME:

Gross Rental Revenue @ 100% Occupancy: \$ \_\_\_\_\_

Actual Rental Revenue: \$ \_\_\_\_\_

Other Income Sources (taxes, insurance, CAM, etc..) \$ \_\_\_\_\_

**Total Actual Revenue:** \$ \_\_\_\_\_

### EXPENSES:

Management: \$ \_\_\_\_\_

Insurance (property insurance only) \$ \_\_\_\_\_

Administrative \$ \_\_\_\_\_

Repairs and Maintenance \$ \_\_\_\_\_

Contract Services \$ \_\_\_\_\_

Utilities \$ \_\_\_\_\_

Other \$ \_\_\_\_\_

*\*Excluding debt services, interest, depreciation, and property taxes\**

Allowance for replacements, if any \$ \_\_\_\_\_

**Total Expenses:** \$ \_\_\_\_\_

Additional comments/information: \_\_\_\_\_

If further clarification is needed, may we contact you? YES NO Method of contact:  
Email Phone

Date: \_\_\_\_\_ Contact Information: \_\_\_\_\_

Printed Name: \_\_\_\_\_ *I respectfully decline to participate at this time.*

Signature: \_\_\_\_\_

# Property Performance Survey

CRE Property : Medical office PID: \_\_\_\_\_ Situs: \_\_\_\_\_

## Operating Statement for 2021

### Property Configuration:

Total # of Leasable Units: \_\_\_\_\_ Total # Vacant Units, if any: \_\_\_\_\_

### Lease Information:

Typical Lease Duration: \_\_\_\_\_ YEAR(s) Typical Lease Rate Terms: Gross NNN

Rental Rate Trends: Increasing Decreasing Stable

### Recent Leases (*disregard if rent roll provided*):

Please indicate lease(s) that began during the 2021 calendar year, if any.

Size of suite: \_\_\_\_\_ Length: \_\_\_\_\_ Rental Rate: \_\_\_\_\_ Base or NNN

Size of suite: \_\_\_\_\_ Length: \_\_\_\_\_ Rental Rate: \_\_\_\_\_ Base or NNN

### INCOME:

Gross Rental Revenue @ 100% Occupancy: \$ \_\_\_\_\_

Actual Rental Revenue: \$ \_\_\_\_\_

Other Income Sources (taxes, insurance, CAM, etc..) \$ \_\_\_\_\_

**Total Actual Revenue:** \$ \_\_\_\_\_

### EXPENSES:

Management: \$ \_\_\_\_\_

Insurance (property insurance only) \$ \_\_\_\_\_

Administrative \$ \_\_\_\_\_

Repairs and Maintenance \$ \_\_\_\_\_

Contract Services \$ \_\_\_\_\_

Utilities \$ \_\_\_\_\_

Other \$ \_\_\_\_\_

*\*Excluding debt services, interest, depreciation, and property taxes\**

Allowance for replacements, if any \$ \_\_\_\_\_

**Total Expenses:** \$ \_\_\_\_\_

Additional comments/information: \_\_\_\_\_

If further clarification is needed, may we contact you? YES NO Method of contact:  
Email Phone

Date: \_\_\_\_\_ Contact Information: \_\_\_\_\_

Printed Name: \_\_\_\_\_ *I respectfully decline to participate at this time.*

Signature: \_\_\_\_\_

# Property Performance Survey

CRE Property : Lodging Facility PID: \_\_\_\_\_ Situs: \_\_\_\_\_

## Operating Statement for 2021

### Property Configuration:

Total # of Rooms: \_\_\_\_\_ Average Daily Room Rate 2021: \_\_\_\_\_

### INCOME:

Gross Rental Revenue @ 100% Occupancy: \$ \_\_\_\_\_

Actual Rental Revenue: \$ \_\_\_\_\_

Other Income Sources (Laundry, Vending, Etc. \$ \_\_\_\_\_

**Total Actual Revenue:** \$ \_\_\_\_\_

### EXPENSES:

Management: \$ \_\_\_\_\_

Franchise Fees (including Reservation system) \$ \_\_\_\_\_

Insurance (property insurance only) \$ \_\_\_\_\_

Administrative \$ \_\_\_\_\_

Contract Services \$ \_\_\_\_\_

Utilities \$ \_\_\_\_\_

Other \$ \_\_\_\_\_

*\*Excluding debt services, interest, depreciation, and property taxes\**

Allowance for replacements, if any \$ \_\_\_\_\_

**Total Expenses:** \$ \_\_\_\_\_

Additional comments/information: \_\_\_\_\_

\_\_\_\_\_  
If further clarification is needed, may we contact you? **YES** **NO** Method of contact:  
**Email Phone**

Date: \_\_\_\_\_ Contact Information: \_\_\_\_\_

Printed Name: \_\_\_\_\_ *I respectfully decline to participate at this time.*

Signature: \_\_\_\_\_