

Commercial Operating Statement City of Franklin Assessor's Office

Email: assessor@franklinwi.gov

Mail: **Forward Appraisal, 1794 Allouez Ave Ste C - Box 125, Green Bay, WI 54311**

Parcel Number: _____ This property is fully owner-occupied (no income) Name: _____ Date: _____

Building # _____, Known As: _____	
Predominant building type: <input type="checkbox"/> Automotive <input type="checkbox"/> Apartment/Hotel <input type="checkbox"/> Industrial/Storage <input type="checkbox"/> Medical/Dental <input type="checkbox"/> Office <input type="checkbox"/> Retail <input type="checkbox"/> Vacant/Paving	
Total Building Area (sf) _____	-or- Net Rentable Area (sf) _____ Current Overall Vacancy Rate _____ Total Living Units _____
Total Office Area (sf) _____	Total Retail Area (sf) - include restaurants, bars, etc _____ Total Warehouse Area (sf) _____

Apartment Data (Livable Area) - Hotels, see "Hotel/Motel Addendum"	
Mark Appropriate Features Included in Monthly Rent:	<input type="checkbox"/> Heat <input type="checkbox"/> Electric <input type="checkbox"/> Common Area (Coin-Op) Laundry <input type="checkbox"/> In-Unit Laundry (# units ____) <input type="checkbox"/> Other: _____ <input type="checkbox"/> Water <input type="checkbox"/> Gas <input type="checkbox"/> Dishwasher <input type="checkbox"/> Cable <input type="checkbox"/> Internet <input type="checkbox"/> Fireplace (# units ____) <input type="checkbox"/> Other: _____

Type	# Units	SF per Unit	Rent (\$/mo/unit)	Type	# Units	SF per Unit	Rent (\$/mo/unit)
◦ 1 Bedroom, 1 Bath				◦ 3 Bedroom, 1 Bath			
◦ 2 Bedroom, 1 Bath				◦ ____ Bedroom, ____ Bath			
◦ 2 Bedroom, 1.5 Bath				◦ ____ Bedroom, ____ Bath			
◦ 2 Bedroom, 2 Bath				◦ ____ Bedroom, ____ Bath			

Parking: # ____ Covered Units @ \$ ____ /mo # ____ Uncovered Units @ \$ ____ /mo Pet Fee: # ____ Units @ \$ ____ /mo

Commercial Rental/Lease Data (Non-Livable Area)											
Unit # / Floor #	Lease Area (Sq Ft)	Tenant Tenant Name & Relation to Owner, if any		Lease End Date	Base Rent \$/sf (or) \$/month	Escalators?			Total Rent (\$) Collected Per Year (or Projected)		
						N	Y	Type	2021 (Proj. 2024)	2022 (Proj. 2025)	2023 (Proj. 2026)
Suite 201	1200 sf	Sample Wisconsin Business, LLC		12/31/20xx	\$1800/mo		x	2% annual	\$20,520	\$20,930	\$21,349

Type	Other Income Total Income (\$) Collected Per Year (or Projected)			Total Income Effective Gross Income Calculation (\$)		
	2021 (p. 2024)	2022 (p. 2025)	2023 (p. 2026)	2021 (p. 2024)	2022 (p. 2025)	2023 (p. 2026)
◦ Parking				Potential Gross Income		
◦ Pet Fee				- Collection Loss \$ (Avg Rate: ____ %)		
◦ CAM				- Vacancy Loss \$ (Avg Rate: ____ %)		
◦				+ Other Income (Total)		
◦						
◦				= Effective Gross Income		

Commercial Operating Statement

Expenses (\$), if any, paid by Owner (or Projected)				Expenses (\$), if any, paid by Tenant (or Projected)			
Type	2021 (p. 2024)	2022 (p. 2025)	2023 (p. 2026)	Type	2021 (p. 2024)	2022 (p. 2025)	2023 (p. 2026)
◦ Advertising	\$	\$	\$	◦ Advertising	\$	\$	\$
◦ Maintenance	\$	\$	\$	◦ Maintenance	\$	\$	\$
◦ Repairs	\$	\$	\$	◦ Repairs	\$	\$	\$
◦ Cleaning	\$	\$	\$	◦ Cleaning	\$	\$	\$
◦ Supplies	\$	\$	\$	◦ Supplies	\$	\$	\$
◦ Management Fees	\$	\$	\$	◦ Management Fees	\$	\$	\$
◦ Commissions	\$	\$	\$	◦ Commissions	\$	\$	\$
◦ Legal/Professional Fees	\$	\$	\$	◦ Legal/Professional Fees	\$	\$	\$
◦ Insurance	\$	\$	\$	◦ Insurance	\$	\$	\$
◦ Utilities	\$	\$	\$	◦ Utilities	\$	\$	\$
◦ Real Estate Taxes	\$	\$	\$	◦ Real Estate Taxes	\$	\$	\$
◦ Other:	\$	\$	\$	◦ Other:	\$	\$	\$
◦	\$	\$	\$	◦	\$	\$	\$
◦	\$	\$	\$	◦	\$	\$	\$
◦	\$	\$	\$	◦	\$	\$	\$
◦	\$	\$	\$	◦	\$	\$	\$
◦	\$	\$	\$	◦	\$	\$	\$
◦	\$	\$	\$	◦	\$	\$	\$
◦	\$	\$	\$	◦	\$	\$	\$
◦	\$	\$	\$	◦	\$	\$	\$
◦ Replacement Reserves	\$	\$	\$	◦ Replacement Reserves	\$	\$	\$

Lease Info	
Are leases "Triple Net (NNN)"? Yes ___ No ___ If "no" please list below the expenses that each is responsible for, <u>per lease agreement</u> :	
Owner responsible for:	Tenant responsible for:

Market Data (Most Recent Valid Sale Info)									
___ Purchased Land Only (or) ___ Purchased Land & Buildings \$ _____ \$ _____ Year _____ Year _____ Land Size: _____ sf (Cap rate used, if known: _____ %)	___ Purchase price included considerations other than Real Estate <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 70%;">Item</th> <th style="width: 30%;">Amount (\$)</th> </tr> </thead> <tbody> <tr><td>◦</td><td></td></tr> <tr><td>◦</td><td></td></tr> <tr><td>◦</td><td></td></tr> </tbody> </table>	Item	Amount (\$)	◦		◦		◦	
Item	Amount (\$)								
◦									
◦									
◦									

Remodeling/New Construction
Any remodeling or capital improvements in the last 5 years? Yes ___ No ___ If "yes", please describe and provide costs: <div style="text-align: right;">\$ _____</div>
Any new construction in the last 2 years? Yes ___ No ___ If "yes", please describe and provide costs: <div style="text-align: right;">\$ _____</div>