



COMMONWEALTH OF VIRGINIA
City of Williamsburg
Department of Finance
REAL ESTATE ASSESSMENT DIVISION

401 Lafayette Street
Williamsburg, VA 23185
(757) 220-6185
Fax (757) 220-6185

<Property Owner>
<C/O>
<Address>
<City>, <State> <Zip>

December 31, 2021

Property Address: <Property Address>
Vision PID(s): <Vision PID>
Model: <Model>

Dear Property Owner:

This is an official request pursuant to Title 58.1-3294 of the Code of Virginia which requires you to furnish this office with income and expense data for specific income producing properties for calendar year 2021. Participation is voluntary for properties that are either (1) a residential building with less than four units, (2) an owner occupied structure, (3) an office building with over 12,000 square feet that is not engaged in a retail or wholesale business where merchandise is sold. Participation for these types of properties will ensure that the taxable value applied is not higher than it should be.

[SURVERYS MUST BE COMPLETED AND RETURNED BY FEBRUARY 1, 2022](#)

[PLEASE USE ATTACHED CITY FORMS](#)

This survey is part of an ongoing effort to obtain current information on the income and expense characteristics of income producing properties, and is necessary to complete our statutory duty of assessing all property at fair market value. Your assistance is necessary to help ensure that our assessments are fair and accurate. It is also your opportunity to tell us if there are any other conditions we should consider in assessing your property.

Please be assured that this information will be kept strictly confidential, subject to criminal penalties, in accordance with Title 58.1-3 of the Code of Virginia.

Your cooperation with this legal requirement is sincerely appreciated.

Respectfully yours,

Derek J. Green, AAS
City of Williamsburg
City Assessor

City of Williamsburg
Real Estate Assessment Department
401 Lafayette Street
Williamsburg, VA 23185
(757) 220 - 6185

ANNUAL LODGING OPERATING DATA SURVEY

INFORMATION SUBMITTED ON THIS FORM WILL NOT BE DIVULGED TO ANY UNAUTHORIZED PERSON, UNDER PENALTY OF LAW, SECTION 58.1-3 CODE OF VIRGINIA

Business Name: <Business Name>
Vision PID: <Vision PID>
Property Address: <Property Address>

<u>CALENDAR YEAR</u>	<u>2021</u>	<u>2020</u>	<u>2019</u>
Number of Rooms	_____	_____	_____
Percentage of Occupancy	_____	_____	_____
Total Room Nights Sold	_____	_____	_____
Average Daily Rate Per Occupied Room	_____	_____	_____

REVENUE

<u>CALENDAR YEAR</u>	<u>2021</u>	<u>2020</u>	<u>2019</u>
Rooms	_____	_____	_____
Food	_____	_____	_____
Beverage	_____	_____	_____
Telephone	_____	_____	_____
Public Room Rentals and Other Income	_____	_____	_____
Other Operated Departments	_____	_____	_____
Other _____	_____	_____	_____
TOTAL REVENUE COLLECTED	_____	_____	_____

DEPARTMENTAL COSTS AND EXPENSES

EXPENSES: If the expense items listed on the following page are applicable to the operation of the real property, please insert the appropriate amount of the expense. If an expense item is not listed, space is provided under other expense items to insert the type of expense and the amount. The annual expense item must coincide with the same annual period specified for gross income. You may have to allocate certain expense items that are not incurred annually. For example, exterior painting may be needed every 7 years. Do not include the total expense for such items if the expense was incurred during this annual reporting period. If painting is done every 7 years and the cost is \$21,000, the amount to report would be \$3,000 (\$21,000 divided by 7 years). Do not include depreciation allowance or mortgage payments as expenses.

<u>CALENDAR YEAR</u>	<u>2021</u>	<u>2020</u>	<u>2019</u>
DEPARTMENTAL EXPENSES			
Rooms Department			
Salaries and Wages including Vacation	_____	_____	_____
Payroll Taxes and Employee Benefits	_____	_____	_____
Laundry, Linen, and Guest Supplies	_____	_____	_____
Commission and Reservation Expenses	_____	_____	_____
Other _____	_____	_____	_____
Total Rooms Expenses	_____	_____	_____
Food Department			
Salaries and Wages including Vacation	_____	_____	_____
Payroll Taxes and Employee Benefits	_____	_____	_____
Cost of Food Consumed	_____	_____	_____
Laundry and Dry Cleaning	_____	_____	_____
China, Glassware, Silver, and Linen	_____	_____	_____
Contract Cleaning	_____	_____	_____
Other _____	_____	_____	_____
Total Food Expenses	_____	_____	_____

CALENDAR YEAR202120202019

Beverage Department

Salaries and Wages including Vacation

Payroll Taxes and Employee Benefits

Cost of Beverage Consumed

Laundry and Dry Cleaning

China, Glassware, Silver, and Linen

Contract Cleaning

Other _____

Total Beverage Expenses

UNDISTRIBUTED OPERATING EXPENSES

Administrative and General

Franchise Fees

Marketing and Guest Entertainment

Property Operation and Maintenance

Energy Costs

Water and Sewer

Other _____

Total Undistributed Operating Expenses

CALENDAR YEAR

2021

2020

2019

MANAGEMENT FEES, PROPERTY TAXES, AND INSURANCE

Management Fees	_____	_____	_____
Real Estate Taxes	_____	_____	_____
Personal Property Taxes	_____	_____	_____
Insurance on Buildings and Contents	_____	_____	_____
Other _____	_____	_____	_____
Total Management Fees, Property Taxes and Insurance	_____	_____	_____

TOTAL OF ALL EXPENSES

_____	_____	_____
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NET OPERATING INCOME

_____	_____	_____
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**COST OF FURNISHINGS (FF&E) PER
ROOM (UNDEPRECIATED)**

_____	_____	_____
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Signature and Verification

The undersigned declares under penalties provided by law, this return (including any accompanying schedules and statements) has been examined and is believed to be a true, correct and complete return. If the return is prepared by any person other than the owner, his/her declaration is based on all the information relating to the matters required to be reported in the return of which he/she has knowledge.

Date	Signature of Owner or Agent	Title	Telephone & Area Code
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Print Name of Owner or Agent	Email Address
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