



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, 2022

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 2022. 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, 2021](#)**

**[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, Virginia 23185  
(757) 220-6185**

## ANNUAL APARTMENT 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

Assessing NBHD: <Assessing NBHD>  
 Vision PID: <Vision PID>  
 Property Address: <Address>

*PLEASE NOTE THAT WE REQUEST EITHER THE ATTACHED FORM BE COMPLETED OR A COMPUTER GENERATED INCOME AND EXPENSE STATEMENT MAY BE PROVIDED FROM YOUR OWN SOFTWARE. **CITY FORM PREFERRED.***

### INCOME

<u>CALENDAR YEAR</u>	<u>2022</u>	<u>2021</u>	<u>2020</u>
Gross Potential Rental Income	_____	_____	_____
Other Rental Income	_____	_____	_____
Late Fee Income	_____	_____	_____
Other Non-Rental Income	_____	_____	_____
Less Rent Concessions	(_____)	(_____)	(_____)
Less Vacancy & Collection Loss	(_____)	(_____)	(_____)
<b>TOTAL INCOME COLLECTED</b>	_____	_____	_____

### 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 miscellaneous 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.

CALENDAR YEAR

2022

2021

2020

**UTILITIES, MAINTENANCE AND HOUSEKEEPING**

Electricity \_\_\_\_\_

Gas \_\_\_\_\_

Water & Sewer \_\_\_\_\_

Telephone \_\_\_\_\_

Maintenance & Repairs \_\_\_\_\_

Roof Repairs \_\_\_\_\_

Other Common Area or Exterior \_\_\_\_\_

Interior Decorating \_\_\_\_\_

Miscellaneous Repairs \_\_\_\_\_

Swimming Pool \_\_\_\_\_

Trash & Snow Removal \_\_\_\_\_

Extermination \_\_\_\_\_

Landscaping & Grounds \_\_\_\_\_

Security \_\_\_\_\_

Other \_\_\_\_\_

**TAXES**

Real Property Taxes \_\_\_\_\_

Other Taxes, Fees \_\_\_\_\_

**INSURANCE**

Property Insurance \_\_\_\_\_

Liability Insurance \_\_\_\_\_

**CALENDAR YEAR**202220212020**GENERAL AND ADMINISTRATIVE**

Management \_\_\_\_\_

Leasing \_\_\_\_\_

Accounting and Legal \_\_\_\_\_

Payroll \_\_\_\_\_

Payroll Insurance, Benefits, and Taxes \_\_\_\_\_

Professional Services \_\_\_\_\_

Bad Debt Allowance \_\_\_\_\_

Advertising &amp; Promotion \_\_\_\_\_

Misc. Exp. \_\_\_\_\_

Misc. Exp. \_\_\_\_\_

Replacement Reserves \_\_\_\_\_

TOTAL EXPENSES: \_\_\_\_\_

**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.

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 Date                                  Signature of Owner or Agent                                  Title                                  Telephone & Area Code

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 Print Name of Owner or Agent                                  Email Address

<Business Name>

Please include all units, such as units which are used as a rental office, model, and furnished units. List those units occupied by the resident staff as a part of their salary.

Unit Type	Number Units	Unit Sq. Ft.	Monthly Rent	Occupied Units
Example: 1 Bedroom/1.0 Bath	26	720	\$700.00	25
Example: 2 Bedroom/1.5 Bath with Den	12	1200	\$950.00	10

Utilities included in the rent (please check):

Water/Sewer\_\_\_\_\_Hot Water\_\_\_\_\_Electricity\_\_\_\_\_Gas Heat\_\_\_\_\_

Gas Cooking\_\_\_\_\_Air Conditioning\_\_\_\_\_

Additional comments: