

SCHEDULE A: Apartment Rental Income

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

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		
<i>Single Room Occupancy(SRO)</i>							
Studio							
1 Bedroom							
2 Bedroom							
3 Bedroom							
4 Bedroom							
Other Rentable Units (Furnished Units)							
Owner/Manager/Janitor Occupied							
SUBTOTAL							
Garage Parking Space							
Outdoor Parking Space							
Other Income (Specify)							
TOTAL							

COPY AND ATTACH ADDITIONAL PAGES (IF NEEDED)

W: Water Sewer
 E: Electricity
 Heat: Oil/Gas/Elec
 Other: Explain