



DEPARTMENT OF REAL ESTATE ASSESSMENTS

2100 Clarendon Blvd., Suite 611 Arlington, VA 22201
TEL 703.228.3920 www.arlingtonva.us

TO WHOM IT MAY CONCERN:

The Department of Real Estate Assessments is collecting and analyzing information for the annual reassessment of real estate. Comparable sales, replacement cost data, and income and expense information will be used to make fair market value assessments of properties in Arlington County.

The accompanying survey has been designed for the analysis of income-producing properties. The information will be used to determine the ranges of operating characteristics and the investment criteria present in the marketplace for income-producing real estate.

This request is made by the authority of the Constitution of Virginia and the Code of Virginia. The income and expense information which is provided will be kept confidential according to Section 58.1-3 of the Code of Virginia. ***If there is willful failure to furnish statements of income and expenses in a timely manner to the director, the owner of such parcel of real estate shall be deemed to have waived his or her right in any proceeding contesting the assessment to utilize such income and expenses as evidence of fair market value. (Code of Virginia 15.2-716).***

All income and expense statements must be certified with the signature of the owner, an officer of the corporation, or the duly authorized agent of the owner. If the statement is certified by an agent, an express authorization from the owner to do so must be submitted with the statement.

This request for information is not limited to income and expenses but extends to all things that affect the value of the subject property including, but not limited to, structural defects, physical conditions, lease terms, etc. Please describe these and provide any supporting documentation in 8 ½ X 11 format. Please submit the signed form with any supporting documents to the Department of Real Estate Assessments by April 15, 2010.

If you have any questions, or wish to discuss the survey form with a member of the assessment staff, please call (703) 228-3920 between 8:00 AM and 5:00 PM Monday through Friday.

Sincerely,

A handwritten signature in black ink, appearing to read "Thomas L. Rice".

Thomas L. Rice, Director

TLR/wv
Enclosure



*** CONFIDENTIAL ***

ARLINGTON COUNTY, VIRGINIA
DEPARTMENT OF REAL ESTATE ASSESSMENTS
2100 CLARENDON BOULEVARD, SUITE 611
ARLINGTON, VIRGINIA 22201
(703) 228-3920



E-Mail: Realog2@arlingtonva.us

WEBSITE: www.arlingtonva.us

PLEASE COMPLETE AND RETURN TO ABOVE ADDRESS BY APRIL 15, 2010

HOTEL/MOTEL INCOME AND EXPENSE QUESTIONNAIRE

ALL INFORMATION REQUESTED IS PURSUANT TO THE CONSTITUTION OF VIRGINIA AND THE TAX CODE OF VIRGINIA AND ALL DATA FURNISHED WILL REMAIN CONFIDENTIAL IN ACCORDANCE WITH 58.1-3 OF THE CODE OF VIRGINIA. IF THERE IS WILLFUL FAILURE TO FURNISH STATEMENTS OF INCOME AND EXPENSES IN AT TIMELY MANNER TO THE DIRECTOR, THE OWNER OF SUCH PARCEL OF REAL ESTATE SHALL BE DEEMED TO HAVE WAIVED HIS OR HER RIGHT IN ANY PROCEEDING CONTESTING THE ASSESSMENT TO UTILIZE SUCH INCOME AND EXPENSES AS EVIDENCE OF FAIR MARKET VALUE. (CODE OF VIRGINIA 15.2-716)

LIST ALL RPC'S INCLUDED IN THIS STATEMENT:

Accounting period: From: (Mo.) (Yr.) To: (Mo.) (Yr.)

Name of Project:

Property address

Owner Name:

Management Firm or Agent

Address:

No. Street Suite No. City State Zip

Does the Management Company have an ownership interest in the property? (Explain)

Are any operating expenses paid to persons with an ownership interest? (Explain)

NOTE: Income and Expense information provided will not be considered valid unless signed and dated by owner or officer of the corporation or an authorized agent as requested below. IMPORTANT: AGENTS AND PROPERTY MANAGERS MUST ATTACH EXPRESS WRITTEN AUTHORITY FROM OWNER TO SIGN THIS FORM.

ALL OF THE INFORMATION PROVIDED HEREIN HAS BEEN EXAMINED BY ME AND IS TRUE, CURRENT, AND COMPLETE, TO THE BEST OF MY KNOWLEDGE.

Name (Please print or type) (Signature of Owner or Authorized Agent)

Title (Owner or authorized agent) Company

Telephone No. () Date

DATE DREA RECD

DATE RECORD ENTRY

INCOME AND EXPENSE INFORMATION

REVENUES

Rooms\$ _____
Food _____
Beverages _____
Telephone _____
Rental _____
Parking _____

Other..... _____
(Explain) _____
..... _____
..... _____

TOTAL REVENUES \$ _____

EXPENSES

DEPARTMENTAL COSTS AND EXPENSES

Rooms

Salaries & Wages\$ _____
Payroll Taxes & Benefits _____
Laundry, Linen & Guest Supplies..... _____
Commissions..... _____
Reservation Expense _____
Contract Cleaning..... _____
Equipment Leases..... _____
Other Room Expenses _____
(Explain) _____
..... _____

TOTAL ROOM EXPENSES..... \$ _____

Food & Beverages

Salaries & Wages\$ _____
Payroll Taxes & Benefits _____
Laundry, Linen & Guest Supplies..... _____
China, Glassware, Silver & Linen..... _____
Contract Cleaning..... _____
Cost of Goods (Food & Bev) _____
Equipment Leases..... _____
Other Operating Costs _____
Explain..... _____
..... _____

TOTAL FOOD & BEVERAGES EXPENSES \$ _____

Telephone

Telephone Expenses.....\$ _____
Telephone Leases..... _____

TOTAL TELEPHONE EXPENSES..... \$ _____

Other Departmental Expenses

(Explain)\$ _____
..... _____

TOTAL OTHER DEPARTMENTAL EXPENSES \$ _____

TOTAL DEPARTMENTAL EXPENSES \$ _____

UNDISTRIBUTED OPERATING EXPENSES

Administrative and General

Payroll & Administration \$ _____
Legal & Accounting Fees _____
Other Administrative Expenses _____
(Explain)

TOTAL ADMINISTRATIVE AND GENERAL EXPENSES..... \$ _____

Management

Base Fee \$ _____
Incentive Fee _____
Other _____
(Explain)

TOTAL MANAGEMENT \$ _____

Marketing

Salaries, Wages & Benefits \$ _____
Advertising..... _____
Franchise Fee _____
Other..... _____
(Explain)

TOTAL MARKETING..... \$ _____

Property Operations & Maintenance

Payroll..... \$ _____
Supplies..... _____
HVAC Repairs _____
Electric Repairs _____
Plumbing Repairs _____
Elevator Repairs/Maintenance _____
Exterior Repairs..... _____
Roof Repairs _____
Miscellaneous Repairs _____
(Explain)

TOTAL PROPERTY OPERATIONS AND MAINTENANCE..... \$ _____

Energy Costs

Electricity \$ _____
Gas _____
Fuel Oil _____
Water & Sewer..... _____

TOTAL ENERGY COSTS..... \$ _____

Other Unallocated Expenses \$ _____
(Explain)

TOTAL UNDISTRIBUTED EXPENSES \$ _____

INCOME BEFORE FIXED EXPENSES..... \$ _____

Miscellaneous Taxes and Insurance

Personal Property Taxes..... \$ _____
Business License Tax _____
Insurance (Building) _____
Insurance (Contents)..... _____

Reserves for Replacement

(Itemize)..... \$ _____
.....

TOTAL FIXED EXPENSES \$ _____

NET OPERATING INCOME \$ _____

Real Estate Taxes..... \$ _____
Renovations/Capital Improvements..... \$ _____

Total number of rooms..... _____

Capacity of conference/meeting facilities _____

Average daily room rate achieved _____

Percentage of occupancy achieved _____

Projected average daily room rate for next year..... _____

Projected occupancy for next year..... _____

LEASED OPERATIONS

Restaurants \$ _____

Number _____ Total Seating Capacity _____

Gift Shop \$ _____

Other (Explain) \$ _____

Terms of each lease..... _____

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FURNITURE, FIXTURES & EQUIPMENT

Historical cost \$ _____

Current Value as of (Date)___/___/___ \$ _____

Replacement Value \$ _____

How are Reserves for Replacement calculated?

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How is management fee calculated?

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How is franchise fee calculated?

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PLEASE ATTACH A COPY OF THE AVERAGE ROOM RATES BY CATEGORY (I.E., SINGLE, DOUBLE, TRANSIENT, GROUP, GOVERNMENT, SPECIAL, ETC.)