

## Office of the Commissioner of the Revenue **Data Center Income and Expense Survey**

Loudoun County 2026 Assessment Valuation

Jan 1 2024 -Dec 31 2024

Owner	Name:		PIN:		
Management Company:			Phone Number:		
Subject Address: Contact Person:			Email: Signature:		
Has there been an appraisal done on this property in the last three years?			Date: Value:		
Have there been any capital improvements during this reporting period?			Cost:		
Is the b	he building 100% owner occupied?  Type of Lease:		Type of Lease:		
Does a	a single tenant lease 75% or more?				
		and statements have been exami	ned by me and to the best of my knowledge are true, corn	rect, and complete	
PART	Income				
Actual	Income				
1.	Office Income	1.			
2.	Retail Income	2.			
3.	Warehouse Income				
4.	Parking Income				
5.	Retail Overage/Percentage Rent				
<b>6</b> .	Other	6.		<del>_</del>	
	ue Expense Recoveries		EGI		
7.	Common Area Maintenance Recoverie	•			
8.	Real Estate Tax Recoveries	•			
9.	Insurance Recoveries	V.			
10.	Operating Expense Recoveries				
11.	Other	11.	201	_	
	ue Loss for Reporting Period Income Loss from Vacancy	40.	PGI		
12.	Bad Debts/Rent Loss				
13.	Rent Concessions				
14. 15.	Other	• • • • • • • • • • • • • • • • • • • •			
-			/		
PART	Expenses	Pa	aid by	Paid	
Utility		Te	enant Service	Tena	
1.	Electricity		21. Landscaping	21.	
2.	Water and Sewer		22. Trash Removal		
3.	Gas/Oil		23. Security		
<b>4</b> .	Telecommunications		24. Snow Removal		
<b>5.</b> Janitor	Other	5.	25. OtherAdministrative and General	25.	
6.	Janitorial	6.	<b>26.</b> Payroll and Administration	26.	
	tions and Maintenance		27. Legal and Accounting		
<b>7.</b>	Maintenance Payroll	7.	28. Payroll Taxes		
7. 8.	Maintenance Supplies		29. Employee Benefits		
9.	HVAC Repairs		<b>30.</b> Other	30.	
10.	Electric Repairs		Management	<b>~~</b> .	
11.	Plumbing Repairs		<b>31.</b> Salaries, Wages, and Benefits	31.	
12.	Elevator Repairs/Maintenance	12.	32. Leasing Commissions	32.	
13.	Common Area/Exterior Repairs	13.	<b>33.</b> Other	33.	
14.	Decorating		Miscellaneous		
15.	Roof Repairs		34. Miscellaneous	34.	
16.	Parking Lot/Garage Repairs		Taxes and Insurance		
17.	Other		35. Business Personal Property Tax	35.	
Market			36. Business License Tax		
18.	Salaries, Wages, and Benefits	18.	37. Building Insurance		
19	Advertising		38. Other		
20.	Other		Real Estate Taxes and Reserves		
			39. Real Estate Taxes	39.	
			An Reserves for Replacement	40	

The Income and Expense information MUST be placed on this form. Please attach a detailed rent roll. Supplemental information such as a complete operating statement should be included. If you should have any questions or need assistance, please contact our office.





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PART III Property Characteristics	

Type of Space	Total Building Square Footage	Leasable Square Footage	Square Footage Leased	Square Footage Vacant		
Shell Space:						
Office:						
Data Center:						
Finished Office:						
Total:						
Total Monthly Power Usag	ge (in watts)		-			
List the address of any buildings that are 100% subleased						

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## PART VII Summary

PART VI Notes

Incon	ne:	11	Expense	es:
1.	EGI	1.	1.	Utility
2.	Revenue Loss	2.	2.	Janitorial
3.	PGI	3.	3.	Operations and Maintenance.
4.	NOI	4.	4.	Marketing
		7-1	5.	Service
			6.	Administrative and General

1.	Utility	1.	
2.	Janitorial	2.	
3.	Operations and Maintenance	3.	
4.	Marketing	4.	
5.	Service	5.	
6.	Administrative and General	6.	
7.	Management	7.	
8.	Miscellaneous	8.	
9.	Taxes and Insurance	9.	
10.	Real Estate Taxes and Reserves	10.	

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