**HOTEL/ MOTEL INCOME QUESTIONNAIRE**

FOR THE 36 MONTHS FROM 1/1/2022 TO 12/31/2024

# «PROPERTY\_NAME» «OWNER\_OF\_RECORD»

«ADDRESS\_OF\_PROPERTY» «TAX\_ACCOUNT\_s»

Total Number of Rentable Rooms: \_\_\_\_\_\_\_\_\_\_\_Number of Parking Spaces: \_\_\_\_\_\_\_\_\_\_\_

 **2022 2023 2024**

Average Rate/Room/Day $

Average Number of Rooms Occupied/Day $

Percentage of Occupancy for Year $

REVPAR (Revenue Per Available Room) $

Total # of Beds\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Annual Occupancy Rate\_\_\_\_\_\_\_\_\_\_\_\_\_

**REVENUE FROM OPERATIONS:**

SEE ATTACHED FINANCIALS

1. Room Rentals $

2. Food & Beverage $

3. Other Income (List) $

4. Retail Tenants (List) $

**DEPARTMENTAL EXPENSES:**

5. Rooms $

6. Food & Beverage $

7. Other Costs (List) $

**UNALLOCATED EXPENSES:**

 8. Administrative Costs (List) $

 9. Marketing $

10. Electricity & Utilities $

11. Maintenance & Repairs (List) $

12. Insurance $

13. Management Fee $

14. Franchise Fees $

**OTHER EXPENSES:**

15. Real Estate Taxes $

16. Building Depreciation $

17. Mortgage Interest Payment $

18. Reserves for Replacements (List) $

19. Capital Expenditure (List) $

20. Furn., Fixtures & Equip. Total Value $

21. Other Intangible Values Assigned. $

## MORTGAGE/SALES INFORMATION

 1. Is there a current mortgage on this property? Yes\_\_\_\_\_\_ No\_\_\_\_\_\_\_ If “yes,” please provide the following data:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of Mortgagee Loan Amount Monthly Payment Interest Rate Term of Mortgage

 2. Please Provide: Date Purchased \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Consideration \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 3. Is there a lease or management agreement? Yes\_\_\_\_\_\_ No\_\_\_\_\_\_\_

If so, please summarize the terms and conditions of the agreement:

 TYPE: ( ) MANAGEMENT ( ) LEASE ( ) SALE-LEASEBBACK

 LESSEE OR MANAGEMENT CO. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 DATE \_\_\_\_\_\_\_ TERM \_\_\_\_\_\_\_ FEE \_\_\_\_\_\_\_\_\_\_\_

 4. Please summarize the terms and conditions of the franchise agreement:

 Franchise Co. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DATE \_\_\_\_\_\_\_ TERM \_\_\_\_\_\_\_ FEE \_\_\_\_\_\_\_\_\_\_\_

 5. Personal Property Account Number\_\_\_\_\_\_\_\_\_\_\_\_\_ Entity Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**I declare, under the penalties of perjury, that the contents of this form and the accompanying schedules and statements have been examined by me and are true, correct, and complete to the best of my knowledge, information, and belief.**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Owner’s Signature Title of Signer Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Print Name of Signer Phone Number Email

«CLIENT\_NAME» «CLIENTMATTER\_» «ATTORNEY»