

Parcel ID: _____

10/22/2019 V2
 Page 1 of 2

Sale and Income Verification - Working Waterfront Classification Property

Owner: _____

Site: _____

Income and Expense Information

1. Are tenants required to sign annual leases? **YES NO** If YES, what is the typical lease term? _____
2. Are tenants required to pay a CAM fee? **YES NO** If YES, what is the estimated rate (per SF)? _____
3. Are tenants required to pay an apportioned amount of real estate taxes? **YES NO**
4. What is the total income the property would generate if 100% occupied for the entire year? _____

Income Worksheet

(A current Rent Roll can be attached in lieu of completing the following worksheet)

Revenue Source	Annual Amount	Revenue Source	Annual Amount
Slip Rentals		Boating / Manne Supplies	
Overnight Dockage		Boat Sales	
Dry Rack Storage		Leaseable Area(s)	
Boat Washing		Bait & Tackle Sales	
Boat Repairs		Food Sales	
Launching Fees		Beverage Sales	
Fuel & Oil Sales		Other (specify)	
Sub Total #1		Sub Total #2	
Total Annual Incomes (Sub Total #1 and Sub Total #2)			

Expense Worksheet

(A current Financial Statement can be attached in lieu of completing the following worksheet)

Expense Item	Annual Amount	Expense Item	Annual Amount
Utilities		Cost of Goods Sold	
Administrative		Maintenance & Repairs	
Management		Accounting & Legal	
Office Supplies		Pest Control	
Advertising		Groundskeeping	
Insurance		Garbage Removal	
		Reserves for Replacements	
Payroll & Payroll Taxes		Other (specify)	
Sub Total #3		Sub Total #4	
Total Annual Expenses (Sub Total #3 and Sub Total #4)			
Income/Expense Ratio (Please verify that this is accurate)			

Confidential pursuant to F.S.195.027(3)

EDDIE CREAMER, Property Appraiser

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10/22/2019 V2
Page 2 of 2

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Description of Property Amenities

1. Property Address: _____
2. Name of Complex or Business: _____
3. Marina Category (Recreational, Yacht Club, Boatyard, etc.): _____
4. Total Number of Buildings: _____ Total Number of Slips: _____ Total Leasable Area: _____
5. Is any portion of the property owner occupied? **YES** **NO** If YES, how much? _____

6. Type of Operation (please select one):

- Land used predominantly for commercial fishing purposes.
- Land that is accessible to the public and used for launching vessels into navigable waters.
- Marinas and dry stacks that are open to the public.
- Water-dependent marine manufacturing facilities, commercial fishing facilities, and marine vessel

7. Site Amenities (check all that apply):

- | | | | |
|---------------------|---------------------|---------------------|--------------------|
| Restroom Facilities | Charter Business | Restaurant / Lounge | Gas / Diesel Fuel |
| Boat Rental | General Offices | Trailer Storage | Bait & Tackle Shop |
| Retail Store | Small Engine Repair | Boat Sales Office | |

Other (specify): _____

Purchase or Exchange Data Verification

*(This section is ONLY applicable if property was purchased within the past **THREE** years.)*

1. Please verify the date of purchase and price. Date: _____ Purchase Price: _____
2. Was the deed recorded within 12 months of original contract? **YES** **NO** If NO, contract date. _____
3. Was the sale financed? **YES** **NO** If YES, please list financing information.
 First amount financed: _____ Interest rate: _____ Loan term (years): _____ Balloon? (years) _____
 Additional financing: _____ Interest rate: _____ Loan term (years): _____ Balloon? (years) _____
4. Were there any significant items of personal property included in the stated purchase price (Such as furniture, machinery, equipment, free-standing appliances, or other tangible items)? **YES** **NO** If YES, please list and amounts. _____
5. Please list any unusual circumstances or conditions that were present during the transaction. N/A

Parties related by family	Parties related by business	Partial ownership	Distress sale
Forced sale by court order	Foreclosure pending	Title defects	Mineral rights
6. Since the date of purchase, have you substantially altered the property in any way (such as additional buildings, pools or tennis courts, major renovations or demolition)? **YES** **NO** If YES, please list items and approximate cost. _____

Printed Name: _____ Signature: _____ Date: _____ Phone Number: _____
 Buyer Seller Attorney Accountant Manager Closing Agent Broker

EDDIE CREAMER, Property Appraiser