



2024 Annual Income and Expense Report

Town of Shelton

RETURN TO:

City of Shelton
Assessor's Office
54 Hill Street - First Floor
Shelton, CT 06484
Tel: (203) 924-1555 Ext. 1500
Fax: (203) 924-4865

FILING INSTRUCTIONS - The Assessor's Office is preparing for the revaluation of all real property located in Shelton. In order to fairly assess your real property, information regarding the property income and expenses is required. Connecticut General Statutes §12-63c requires all owners of rental real property to annually file this report. **The information filed and furnished with this report will remain confidential in accordance with §12-63c(b), which provides that actual rental and operating expenses shall not be a public record and is not subject to the provisions of Section §1-210 (Freedom of Information).**

Please complete and return the completed form to the Shelton Assessor's Office by on or before June 1, 2025. In accordance with Section §12-63c(d), of the Connecticut General Statutes, as amended, any owner of rental real property who fails to file this form or files an incomplete or false form with intent to defraud, shall be subject to a penalty assessment equal to a **Ten Percent (10%) increase in the assessed value of such property.**

GENERAL INSTRUCTIONS - Complete this form for all rented or leased commercial, retail, industrial or combination property. Identify the property and address. **Provide Annual information for the Calendar Year 2024. TYPE/USE OF LEASED SPACE:** Indicate use the leased space is being utilized for (i.e., office, retail, warehouse, restaurant, garage, etc.). **ESC/CAM/OVERAGE:** (Circle if applicable) **ESCALATION:** Amount, in dollars, of adjustment to base rent either pre-set or tied to the Inflation Index. **CAM:** Income received from common area charges to tenant for common area maintenance, or other income received from the common area property. **OVERAGE:** Additional fee or rental income. This is usually based on a percent of sales or income. **PROPERTY EXPENSES & UTILITIES PAID BY TENANT:** Indicate the property expenses & utilities the tenant is responsible for. Abbreviations may be used (i.e., "RE" for real estate taxes & "E" for electricity). **VERIFICATION OF PURCHASE PRICE** must be completed if the property was acquired on or after January 1, 2024.

WHO SHOULD FILE - All individuals and businesses receiving this form should complete and return this form to the Assessor's Office. If you believe that you are not required to fill out this form, please call the number listed above to discuss your special situation. All properties which are rented or leased, including commercial, retail, industrial and residential properties, except "*such property used for residential purposes, containing not more than six dwelling units and in which the owner resides*", must complete this form. If a property is partially rented and partially owner-occupied this report must be filed.

IF YOUR PROPERTY IS 100% OWNER-OCCUPIED, OR 100% LEASED TO A RELATED CORPORATION, BUSINESS, FAMILY MEMBER OR OTHER RELATED ENTITY, PLEASE INDICATE BY CHECKING THE FOLLOWING BOX ☐.

HOW TO FILE - Each summary page should reflect information for a single property for the year of 2024. If you own more than one rental property, a separate report/form must be filed for each property in this jurisdiction. An income and expense report summary page and the appropriate income schedule must be completed for each rental property. Income Schedule A must be filed for apartment rental property and Schedule B must be filed for all other rental properties. **All property owners must sign & return this form to the Shelton Assessor's Office on or before June 1, 2025 to avoid the Ten Percent (10%) penalty.**

A COMPUTER PRINT-OUT IS ACCEPTABLE AS LONG AS ALL THE REQUIRED INFORMATION IS PROVIDED.

RETURN TO THE ASSESSOR ON OR BEFORE JUNE 1, 2025

2024 ANNUAL INCOME AND EXPENSE REPORT SUMMARY

Owner

Property Name

Mailing Address

Property Address

City / State / Zip

Map / Block / Lot

(Fill in from the Front Instruction Page)

1. Primary Property Use (Circle One)	A. Apartment	B. Office	C. Retail	D. Mixed Use	E. Shopping Center	F. Industrial	G. Other
2. Gross Building Area (Including Owner-Occupied Space)			Sq. Ft.	6. Number of Parking Spaces			
3. Net Leasable Area			Sq. Ft.	7. Actual Year Built			
4. Owner-Occupied Area			Sq. Ft.	8. Year Remodeled			
5. No. of Units							

INCOME - 2024

9. Apartment Rental (From Schedule A)

10. Office Rentals (From Schedule B)

11. Retail Rentals (From Schedule B)

12. Mixed Rentals (From Schedule B)

13. Shopping Center Rentals (From Schedule B)

14. Industrial Rentals (From Schedule B)

15. Other Rentals (From Schedule B)

16. Parking Rentals

17. Other Property Income

18. TOTAL POTENTIAL INCOME (Add Line 9 through Line 17)

19. Loss Due to Vacancy and Credit

20. EFFECTIVE ANNUAL INCOME (Line 18 Minus Line 19)

EXPENSES - 2024

21. Heating/Air Conditioning

22. Electricity

23. Other Utilities

24. Payroll (Except management, repair & decorating)

25. Supplies

26. Management

27. Insurance

28. Common Area Maintenance

29. Leasing Fees/Commissions/Advertising

30. Legal and Accounting

31. Elevator Maintenance

32. Security

33. Other (Specify)

34. Other (Specify)

35. Other (Specify)

36. TOTAL EXPENSES (Add Lines 21 through 35)

37. NET OPERATING INCOME (Line 20 Minus Line 36)

38. Capital Expenses

39. Real Estate Taxes

40. Mortgage Payment (Principal and Interest)

41. Depreciation

42. Amortization

VERIFICATION OF PURCHASE PRICE

(Complete if the property was acquired on or after January 1, 2024)

PURCHASE PRICE \$ _____ DOWN PAYMENT \$ _____ DATE OF PURCHASE _____

FIRST MORTGAGE	\$ _____	INTEREST RATE _____ %	PAYMENT SCHEDULE TERM _____ YEARS	(Check One) Fixed Variable
SECOND MORTGAGE	\$ _____	INTEREST RATE _____ %	PAYMENT SCHEDULE TERM _____ YEARS	
OTHER	\$ _____	INTEREST RATE _____ %	PAYMENT SCHEDULE TERM _____ YEARS	

DID THE PURCHASE PRICE INCLUDE A PAYMENT FOR: Furniture \$ _____ (VALUE) EQUIPMENT \$ _____ (VALUE) OTHER (SPECIFY) \$ _____ (VALUE)

WAS THE SALE BETWEEN RELATED PARTIES (CIRCLE ONE): YES NO APPROXIMATE VACANCY AT DATE OF PURCHASE _____ %

WAS AN APPRAISAL USED IN THE PURCHASE OR FINANCING (CIRCLE ONE): YES NO APPRAISED VALUE /NAME OF APPRAISER _____

PROPERTY CURRENTLY LISTED FOR SALE (CIRCLE ONE) YES NO

IF YES, LIST THE ASKING PRICE \$ _____ DATE LISTED _____ BROKER _____

Remarks - Please explain any special circumstances or reasons concerning your purchase (i.e., vacancy, conditions of sale, etc.) _____

I DO HEREBY DECLARE UNDER PENALTIES OF FALSE STATEMENT THAT THE FOREGOING INFORMATION, ACCORDING TO THE BEST OF MY KNOWLEDGE, REMEMBRANCE AND BELIEF, IS A COMPLETE AND TRUE STATEMENT OF ALL THE INCOME AND EXPENSES ATTRIBUTABLE TO THE ABOVE IDENTIFIED PROPERTY (Section §12-63c (d) of the Connecticut General Statutes).

SIGNATURE _____ NAME (Print) _____ DATE _____

TITLE _____ TELEPHONE _____

RETURN TO THE ASSESSOR ON OR BEFORE JUNE 1, 2025 TO AVOID THE 10% PENALTY