## SCHEDULE A: Apartment Rental Income

Property Location:			Ара	rtment Prope	erty	Calendar Year:	
Assessing Parcel ID:			Rental	Income State	ement	Submitted By:	
Residential Rental Information: Please provide the following rental information.							
Unit Type	No. of Units	Room Count		Monthly Rent		Typical Lease Term	Includes the following:
	Total	Rooms	Bath- room	Per Unit	Total	Lease or Tenant at Will (TAW)	W: Water Sewer E: Electricity Heat: Oil/Gas/Elec Other: Explain
Single Room Occupancy(SRO)							
Studio							
1 Bedroom							
2 Bedroom							
3 Bedroom							
4 Bedroom							
Other Rentable Units (Furnished Units)							
Owner/Manager/Janitor Occupied							
SUBTOTAL							
Garage Parking Space							
Outdoor Parking Space							
Other Income (Specify)							
TOTAL							

E-