



2026 Lackawanna County PA Reassessment

COMMERCIAL INCOME & EXPENSE WORKSHEET



PROPERTY INFORMATION		
Parcel ID:	Total Leasable Building Area (Including owner-occupied space)	Sq Ft
Property Address:	Owner-occupied Area	Sq Ft
Property Use (Check all that Apply):	Net Leasable Area (Not including owner-occupied space)	Sq Ft
<input type="checkbox"/> Apartment <input type="checkbox"/> Office <input type="checkbox"/> Retail	Rental Units (Including owner-occupied units)	
<input type="checkbox"/> Mixed Use <input type="checkbox"/> Shopping Center <input type="checkbox"/> Industrial	Parking Spaces	
<input type="checkbox"/> Other:	Year Built (If known)	
Is any part of this property owner-occupied? <input type="checkbox"/> Yes <input type="checkbox"/> No	Year Remodeled	

This is how much income your property would rent for if fully occupied & leased

It is CRITICAL to check this box if you are using all or part of the property yourself

Enter NET SQ FT excluding common areas

ACTUAL GROSS INCOME - YEAR ENDING 2023	
Apartment Rent (from Schedule A)	\$
Office Rent (from Schedule B)	\$
Retail Rent (from Schedule B)	\$
Mixed Use Rent (from Schedule B)	\$
Shopping Center Rent (from Schedule B)	\$
Industrial Rent (from Schedule B)	\$
Other Rent (from Schedule B)	\$
Parking Rent (from Schedules A & B)	\$
Miscellaneous Income (CAM/Insurance/Tax Reimbursement)	\$
Total Actual Gross Income (Total All Rents & Misc Income)	\$
Actual Vacancy & Credit Loss (Do Not Estimate)	\$
Effective Gross Income (Total Gross Income - Vacancy Loss)	\$

ACTUAL EXPENSES - YEAR ENDING 2023	
Heating Fuel	\$
Gas & Electricity	\$
Water & Sewer	\$
Other Utilities	\$
Payroll (Not Including Management)	\$
Supplies	\$
Management	\$
Insurance	\$
Common Area Maintenance	\$
Leasing Fees/Commissions/Advertising	\$
Legal & Accounting	\$
Elevator Maintenance	\$
Tenant Improvements	\$
General Repairs	\$
Other* (specify):	\$
Other* (specify):	\$
Reserves	\$
Security	\$
Total Actual Expenses	\$
Net Operating Income (Eff Gross Income - Actual Expenses)	\$

CONFIDENTIALITY NOTICE
 We are committed to maintaining the confidentiality of all income and expense information that you provide to us. This form and all financial information provided within are NOT subject to public information.

SEE REVERSE SIDE FOR WORKSHEET CONTINUED

Subtract total Actual Gross Income from Actual Vacancy & Credit Loss to find Effective Gross Income. Typically this amount would match income reported on IRS Form 8825 or Schedule E

Enter all losses due to vacancy and credit

Subtract Total Actual Expenses from Effective Gross Income

*Do not include taxes, depreciation, amortization, or mortgage payments in expenses.



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Property Location:

Parcel ID:

Apartment Income is reported on a **Monthly** basis

Schedule A - APARTMENT RENTS								
Unit Type	Total Units	Rented Units	Rooms Per Unit	Baths Per Unit	Avg Unit Size (Square Feet)	Monthly Rent Per Unit	Monthly Rent Total	Typical Lease Term
Efficiency						\$	\$	
1-Bedroom						\$	\$	
2-Bedroom						\$	\$	
3-Bedroom						\$	\$	
4-Bedroom						\$	\$	
Other Rentable Units						\$	\$	
Owner/Mgr-Occupied						\$	\$	
Parking Income						\$	\$	
Other Income (Specify):						\$	\$	

- Included in Apartment Rent**
(Check all that apply)
- Heat
 - Electricity
 - Air Conditioning
 - Stove/Fridge
 - Dishwasher
 - Garbage Disposal
 - Parking
 - Furnishings
 - Security
 - Pool
 - Tennis Courts
 - Other:

Total Apt Units:

Total Monthly Rent: \$

Total Annual Rent: \$

Non-Apartment Income is reported on a monthly and annual basis

Schedule B - NON-APARTMENT RENTS									
Tenant Name	Lease Start (Month/Year)	Lease End (Month/Year)	Unit Size (Square Feet)	Base Annual Rent	Esc/CAM/Overage	Total Annual Rent	Parking Spaces	Parking Rent	Interior Fit-up Paid by Owner
				\$	\$	\$		\$	\$
				\$	\$	\$		\$	\$
				\$	\$	\$		\$	\$
				\$	\$	\$		\$	\$
				\$	\$	\$		\$	\$
				\$	\$	\$		\$	\$
				\$	\$	\$		\$	\$
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				\$	\$	\$		\$	\$
				\$	\$	\$		\$	\$
				\$	\$	\$		\$	\$
				\$	\$	\$		\$	\$
				\$	\$	\$		\$	\$
Grand Totals:				\$	\$	\$		\$	\$

Total Annual Rent include and CAM, Taxes, Insurance, Escalations and/or Percentage Rent

Indicate the dollar amount of fit up costs



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PURCHASE PRICE VERIFICATION

Parcel ID:

SALE INFORMATION - Please complete if you purchased the property within the last ten (10) years.

Purchase Date		Purchase Price	\$
Selling Broker		Broker Phone #	
Date of Last Appraisal		Appraised Value	\$
First Mortgage	\$	Interest Rate	
Payment Schedule Term		Rate Type	
Property Condition at Time of Sale		Repairs Needed at Time of Sale	\$
Amount of the purchase price allocated for furniture, equipment, or other personal property			\$
Additional Comments:			

LISTING INFORMATION - Please complete if you listed the property for sale within the last five (5) years.

Date Listed		List Price	\$
Listing Broker		Broker Phone #	
Date of Last Appraisal		Appraised Value	\$

ATTESTATION & SIGNATURE - All owners please complete this section.

I do hereby declare that, according to the best of my knowledge, memory, and belief, the information provided is a complete and true statement of all income and expenses attributable to the identified property.

Signature		Date	
Title		Phone #	

All owners must sign and date the attestation above

Please return to the Tyler Technologies Inc. Office by **May 1st, 2024**

Mail to:
Lackawanna County
Government Center, C/O
Tyler Technologies 5th Floor
123 Wyoming Avenue
Scranton, PA 18503

Thank you for taking the time to provide this information.