





**MULTIFAMILY HISTORICAL OPERATING STATEMENT**

Please attach original source operating statements and note replacements and capital improvements. You may provide alternative or supplemental documentation as "See Attached". Must have live signature.

Project Name \_\_\_\_\_  
 Address \_\_\_\_\_  
 City / State / Zip \_\_\_\_\_

	Prior Yr 2	Prior Yr 1	Current YTD # Months
Rents (Gross Scheduled or Actual)			
Other _____			
Other _____			
Other _____			
Total Potential Income			
Less Vacancy			
Less Concessions & Delinquency			
<b>Total Revenues</b>			
Real Estate Taxes			
Other Taxes & Assessments			
Licenses			
Insurance			
Gas			
Electricity			
Water & Sewer			
Trash			
Undetailed-Combined Utilities			
Pest Control			
Building Maintenance & Repairs			
Cleaning & Operating Supplies			
Decorating (Interior & Exterior)			
Pool Maintenance			
Payroll (Janitorial, Salaries, Security)			
Gardening / Landscaping			
Payroll Taxes			
Telephone, Cable & Communications			
Legal / Auditing			
Non Resident Manager (Off Site)			
Resident Manager			
General & Administrative			
Employee Apartment Concession			
Advertising & Marketing			
Other			
Miscellaneous expenses			
<b>Total Expenses (*Excluding CAPEX)</b>			
<b>Net Operating Income</b>			

**\*CAPEX (Non-Recurring Capital Improvements & Replacements)**

Carpeting & Flooring			
Drapes & Blinds			
Appliances			
Other Replacements			
<b>Total Replacements</b>			
Exterior Painting			
Interior Painting			
New Plumbing			
New Electrical			
Termite			
Landscaping			
Other CAPEX			
Other CAPEX			
Other CAPEX			
<b>Total CAPEX</b>			
<b>Total Replacements &amp; CAPEX</b>			

On Site Resident Mgr Compensation \_\_\_\_\_  
 Payroll & Salary Inclusions \_\_\_\_\_  
 Comments: \_\_\_\_\_

*\*The undersigned hereby certifies that all information contained in this certification and hereto attached is true, accurate, and complete.*

CURRENT OWNER / BORROWER SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

CURRENT OWNER / BORROWER SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_