ncome/expense report. Owner Name		Date of Report				
Business Name		Current Total Tax Assessment Contact Phone No.				_
Contact Name	-					_
Parcel ID (s) (Required)	-	Parcel Address				_
Property Type (Required)	Click to Sel		If "Other" Describe			
Number of Bldgs	Click to Sel				Click to Select	
<u> </u>						
		Years				
** You MUST Select an Income Type to Start ** Select Income Type		Click to Select Year				
		Click to Select Teal				
Select income Type						
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		Average Net Operating Income				
		Capitalization Rate				
		Effective Tax Rate				
		Average NOI / Cap Rate = Market Value				
	-	Owner's Declaration of Fair Market Value				
			Owner S Deciar attoll of	ran Market Value		