

# 2017 Property Income & Expense Return



MUNICIPAL  
PROPERTY  
ASSESSMENT  
CORPORATION

## USE THIS FORM TO REPORT ON YOUR RENTAL UNITS AND INCOME

**Need help?** - Call us toll-free at 1 866 296-MPAC (6722) or 1 877 889-MPAC (6722) TTY. If you have accessibility needs, please let our representatives know how we can best accommodate you.

**We respect your privacy** - This information is collected by MPAC under the authority of sections 11, 15, 16 and 16.1 of the Assessment Act, and used for property valuation and assessment purposes. Section 12 identifies penalties for non-compliance. If you have questions, please contact MPAC.

**Other Ways to File** - To file this electronically visit mpac.ca

Income Received		Expenses	
<b>Rents</b>		<b>General</b>	
Residential / Apartment Suites	\$ _____	Property Taxes	\$ _____
Laundry (Multi-Residential)	\$ _____	Insurance	\$ _____
Other Residential (specify)	\$ _____	Land Lease Amounts	\$ _____
_____	\$ _____	<b>Administration</b>	
Retail	\$ _____	Management	\$ _____
Percentage Rents	\$ _____	Legal & Audit	\$ _____
Industrial (specify)	\$ _____	Professional Fees	\$ _____
_____	\$ _____	Leasing Commissions	\$ _____
Office	\$ _____	Marketing & Promotion	\$ _____
		Office Supplies / Equipment	\$ _____
		Wages & Benefits	\$ _____
<b>Other</b>		<b>Utilities</b>	
Storage / Basement	\$ _____	Hydro	\$ _____
Parking	\$ _____	Water / Sewer	\$ _____
Telecommunications	\$ _____	Heat / Ventilation / AC (HVAC)	\$ _____
Property Tax Recoveries	\$ _____	Cable TV	\$ _____
Operating Cost Recoveries	\$ _____	<b>Property Maintenance</b>	
Administration Cost Recoveries	\$ _____	Waste Removal / Recycling	\$ _____
Billboards	\$ _____	Snow Removal / Landscaping	\$ _____
Other (specify)	\$ _____	Elevator / Escalator	\$ _____
1 _____	\$ _____	Heat / Vent. / AC (HVAC)	\$ _____
2 _____	\$ _____	Parking Garage Maintenance	\$ _____
3 _____	\$ _____	Exterior Maintenance	\$ _____
		Security & Fire	\$ _____
		Janitorial	\$ _____
		Pools / Rec. / Tennis etc. Maintenance	\$ _____
		Painting / Decorating etc.	\$ _____
		Other (explain in 'Comments' section)	\$ _____
<b>Rental Income Loss</b>			
Vacancy	\$ _____		
Collection Loss	\$ _____		

**Municipal Property Assessment Corporation**  
Central Processing Facility (PIER)  
PO Box 9808  
Toronto ON M1S 5T9

### Capital Costs Summary

Expenditure Type	Expenditure Date (yyyy)	Expenditure Type	Expenditure Date (yyyy)
Roof	\$ _____	Parking Garage	\$ _____
Exterior Clad	\$ _____	Surface Parking	\$ _____
Windows	\$ _____	Other Type (specify)	
Balconies	\$ _____	1 _____	\$ _____
Fire Retrofit	\$ _____	2 _____	\$ _____
Heating (HVAC)	\$ _____	3 _____	\$ _____

**Comments** (please include any additional information or explanations you feel are pertinent to this enquiry)

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Name: \_\_\_\_\_ Date: \_\_\_\_\_  
last first signature

Telephone: \_\_\_\_\_  
home bus. email

**Note:** This information is collected under the authority of section 11 of the *Assessment Act* and is protected by the *Municipal Freedom of Information and Protection of Privacy Act* and section 53 of the *Assessment Act*. MPAC is prevented from releasing information except as authorized under provincial legislation. MPAC may contact the property owner to conduct surveys or obtain feedback regarding the collection of this and other information.



