



STATE OF FLORIDA
LEE COUNTY PROPERTY APPRAISER
KENNETH M. WILKINSON, C.F.A.



Mailing Address:
P.O. Box 1546
Fort Myers, Florida 33902-1546

Physical Address:
2480 Thompson Street
Fort Myers, Florida 33901-3074

Telephone: (239) 533-6100 -- (866) 673-2868 (From anywhere in continental US/Canada/Florida except 239 area code)
Facsimile: (239) 533-6160 -- **Website:** www.leepa.org

Dear Property Owner/Manager:

Each year the Lee County Property Appraiser's office is required to determine the market value of all property in our county. To assist us in valuing commercial property, we request commercial property owners provide us data relative to the operation of their business. Participation by individual owners ensures that we accurately value all commercial properties in Lee County.

On the back of this letter is a form that details the type of information we are looking for in your type of business. Typically, we use income and expense information in addition to sales transactions in the course of our valuation. Any income information you provide is confidential and is exempt from public disclosure per Fla. Stat. § 195.027. Once we receive your information, we will compare it with all other similar properties and use it to develop market rates for the entire class of properties.

In lieu of filling out the form, feel free to send us a copy of your 2019 income and expense statement, rent roll, property brochure, or other applicable information prepared by your accountant or bookkeeper. If you choose to submit something other than this form, please return this letter with that information so that we can accurately identify the property the data goes with.

If you purchased or sold the property before December 31, feel free to enclose a copy of your closing statement that details the costs involved with the sale of the property and any allocations that were made for any tangible personal property (FF&E). This information helps in the verification of the sales transaction and ensures that we treat the sales transaction properly.

To ensure that we have adequate time to process and analyze the data, please submit your income and expense information as soon as you are able. Taxpayers generally submit their information to us when they have their taxes prepared, so we ask that you try to get it to us no later than late March or early April.

Kindly return the form and any other information in the postage-paid envelope provided. If it is more convenient, you may return the information by e-mail attachment to steinerd@leepa.org, or fax it to (239) 533-6091. Thank you in advance for your cooperation. Should you have any questions or need additional information, please call (239) 533-6237 or email steinerd@leepa.org.

Sincerely,

Kenneth M. Wilkinson, CFA
Lee County Property Appraiser

Income and Expense Statement for Senior Care Properties For the Year Ending December 31, 2019

DBA:

Property Type	# of Beds Operating	# of Beds Licensed	% of Annual Occupancy	% Medicaid	% Medicare	% Private
Skilled Nursing Facility						
Assisted Living Facility						
Independent Living Facility						
Memory Care Facility						
Other:						

Annual Income (In dollars)

Facility Type	Room Type	# of Beds	Monthly Rate	\$ Beds Income
Skilled Nursing	Private			
Skilled Nursing	Semi-Private			
Assisted Living	Private			
Assisted Living	Semi-Private			
Independent Living	Private			
Independent Living	Semi-Private			
Memory Care	Private			
Memory Care	Semi-Private			

Other Rental Income (please explain):

Total Annual Income

Annual Expenses (In dollars)

1.) Management Fees	
Is fee based on a percentage of revenue? (Please check yes or no).	Yes <input type="checkbox"/> No <input type="checkbox"/>
If you answered yes to the above, please list the percentage of revenue. _____%	
2.) Administrative (including advertising, legal, accounting, etc.)	
3.) Payroll	
4.) Dietary Services/Food and Beverage	
5.) Nursing	
6.) Utilities	
7.) Housekeeping	
8.) Repairs	
9.) Grounds Maintenance (including trash, landscaping, parking lot, etc.)	
10.) Insurance Premiums	
11.) Reserves for Replacements	
12.) Cost of Contracted Resident Services (e.g. therapy, etc.)	
13.) Real Estate Taxes	
14.) Other Taxes/Fees	
15.) Capital Expenses	
16.) Other Expenses (please explain):	
17.) Total Annual Expenses	

Contact Information

Submitted by (please print):	Title:
Date:	Telephone:
Property Address:	Email: