

Official Request  
**APARTMENT**  
**INCOME & EXPENSE SURVEY**  
CITY OF ALEXANDRIA  
OFFICE OF REAL ESTATE ASSESSMENTS  
703.746.4646



Tax Assessment Map #      Abstract Code      Account #

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This form is also available at [alexandriava.gov/realestate](http://alexandriava.gov/realestate).  
You may download the form, enter the data via the fillable PDF, and email it to [realestate@alexandriava.gov](mailto:realestate@alexandriava.gov).

**RETURN TO:**  
CITY OF ALEXANDRIA  
OFFICE OF REAL ESTATE ASSESSMENTS  
P.O. BOX 178  
ALEXANDRIA, VIRGINIA 22313-1501

**Dear Property Owner:**

The Office of Real Estate Assessments is in the process of collecting and analyzing information for the annual reassessment of real estate located in the City of Alexandria. This is an official request pursuant to Section 58.1-3294 of the **Code of Virginia** that requires you to furnish this office with income and expense data for any income-producing properties for calendar year 2025. This request is also in compliance with Section 3-2-186 of the Alexandria City Code. All information submitted will be kept strictly confidential under the stipulations of Section 58.1-3 of the **Code of Virginia**.

This survey form is to be completed by the property owner or a duly authorized agent, showing the gross income (at 100% occupancy), vacancies and expenses for the above-mentioned property. The information should encompass the 2025 calendar year.

Income information related to calendar year 2025 that you may have previously submitted to the Office of Real Estate Assessments or to the Board of Equalization as part of a review or an appeal, **must be resubmitted at this time to satisfy this request**. The income information requested by the Department of Finance regarding business licenses is not associated with this request. In addition to the information requested as part of this survey, we request that you submit any other income or expense information that you believe to be relevant to the assessment of your property.

**As of January 1, 2026, to comply with Virginia Code § 58.1-3295, owners of affordable rental housing must submit the Affordable Rental Housing Uniform Income and Expense Report (Form ARH) and associated paperwork developed by the Virginia Department of Taxation. You may call the Virginia Property Tax Unit at (804) 786-4091 with questions regarding Form ARH.**

The enclosed self-addressed envelope is provided for your convenience. The income information must be returned to our office no later than **May 1, 2025, or** postmarked by the U. S. Postal Service no later than **May 1, 2025**. We would like to remind you that any Request for Review of Assessment filed with this office, or any Appeal of Assessment filed with the Board of Equalization, which is based upon the income or expenses attributable to your property, will not be considered unless this information has been filed on time.

If you have any questions regarding this matter or wish to discuss this request form with a member of our appraisal staff, please call between 8:00 a.m. and 5:00 p.m., Monday through Friday. Your cooperation and timely response to this legal requirement will be greatly appreciated.

Sincerely,

**The Office of Real Estate Assessments**

Enclosure

**CERTIFICATION**

State law requires certification by the owner or officially authorized representative. (Please type or print all information except signature.)

Name of apartment \_\_\_\_\_

Property address \_\_\_\_\_

Type of project or building (garden, garden-townhouse, mid-rise, high-rise) \_\_\_\_\_

Owner(s) name(s) \_\_\_\_\_

<p><b>All information including the accompanying schedules and statements have been examined by me and to the best of my knowledge and belief are true, correct, and complete.</b></p>			
Management firm _____	Phone _____		
Address _____			
Date _____	Signature _____	Title _____	
Print Name _____	E-mail _____		

The Income and Expense information must be placed on this form. No alternative forms may be used. A detailed set of instructions is part of this survey. These instructions are provided to assist you in completing the form. If you should have any questions or need assistance, please call our office at 703.746.4646.

**A. ANNUAL INCOME TOTALS**

1. Potential Rental Income:

- 01a Market rent as of January 1, 2025, from **residential apartments**, assuming 100% occupancy \_\_\_\_\_
- 01b Market rent as of January 1, 2025, from any **commercial office and/or retail units**, assuming 100% occupancy \_\_\_\_\_
- 01c Total Potential Rental Income (Sum of Lines 01a and 01b) \_\_\_\_\_

2. Vacancy and Collection Loss (Calendar Year 2025):

	Residential	Commercial
02 Income loss due to vacancy .....	_____	_____
03 Income loss due to collection loss .....	_____	_____
04 <b>Total Vacancy and Collection Loss (Sum of Lines 02 through 03) .....</b>	_____	_____

3. Actual Gross Income (Calendar Year 2025):

05a Actual <b>apartment</b> rental income received .....	_____	_____
05b Actual <b>commercial</b> rental income received .....	_____	_____
05c <b>Actual income received (Sum of Lines 05a through 05b) .....</b>	_____	_____

4. Other Income (Calendar Year 2025):

06 Excess rent attributable to corporate suites. ....	_____	_____
07 Laundry income (Contract? Owner Managed? ) .....	_____	_____
08 Utility reimbursements.....	_____	_____
09 Interest income .....	_____	_____
10 Insurance reimbursements.....	_____	_____
11 Garage/Parking rents.....	_____	_____
12 Furniture rental income.....	_____	_____
13 Clubhouse rental .....	_____	_____
14 Special fees .....	_____	_____
15 HUD mortgage interest subsidy reimbursements .....	_____	_____
(Specify: _____)		
16 Concessions/ Vending machine income .....	_____	_____
17 Miscellaneous/Antenna Income (Specify: _____) .....	_____	_____
18 <b>Total Other Income (Sum of Lines 06 through 17).....</b>	_____	_____

**TOTAL ACTUAL INCOME (Line 05c plus Line 18).....** \_\_\_\_\_

**B. ANNUAL OPERATING EXPENSES (Calendar Year 2025)**

	Residential	Commercial
1. Utilities:		
19. Water and sewer.....	_____	_____
20a Electricity – excludes HVAC.....	_____	_____
20b Electricity – includes HVAC.....	_____	_____
21 Primary heating fuel (Specify: _____).....	_____	_____
22 Other fuel (Specify: _____).....	_____	_____
<b>TOTAL UTILITIES (Sum of Lines 19 through 22).....</b>	_____	_____
2. Maintenance and Repairs:		
23 Maintenance payroll (including payroll taxes and benefits).....	_____	_____
24 Maintenance supplies.....	_____	_____
25 HVAC repairs.....	_____	_____
26 Elec/Plumbing repairs.....	_____	_____
27 Elevator repairs.....	_____	_____
28 Roof repairs.....	_____	_____
29 Pool repairs.....	_____	_____
30 Other common area or exterior repairs.....	_____	_____
31 Typical redecorating or refit costs (i.e. painting, carpet, etc.).....	_____	_____
32 Other (Specify: _____).....	_____	_____
<b>TOTAL MAINTENANCE AND REPAIRS (Sum of Lines 23 through 32).....</b>	_____	_____
3. Administrative:		
33 Management fees.....	_____	_____
34 Administrative payroll (including payroll taxes and benefits).....	_____	_____
35 All other administrative costs.....	_____	_____
36 Corporate suite expense.....	_____	_____
<b>TOTAL ADMINISTRATIVE (Sum of Lines 33 through 36).....</b>	_____	_____
4. Services:		
37 Janitorial/Cleaning.....	_____	_____
38 Landscape.....	_____	_____
39 Trash service.....	_____	_____
40 Security/Pool service.....	_____	_____
41 Snow removal.....	_____	_____
<b>TOTAL SERVICES (Sum of Lines 37 through 41).....</b>	_____	_____
5. Insurance and Taxes:		
42 Estimated 2023 Alexandria Stormwater Utility Fee.....	_____	_____
43 Fire, Casualty insurance.....	_____	_____
44 Other taxes, fees (including occupancy tax).....	_____	_____
45 Real estate taxes.....	_____	_____
<b>TOTAL INSURANCE AND TAXES (Sum of Lines 42 through 45).....</b>	_____	_____
6. TOTAL OPERATING EXPENSES BEFORE REPLACEMENT RESERVES		
46 <b>Total Expenses</b> .....	_____	_____
7. Replacement Reserves (2023) (please attach reserve bank account statement)	_____	_____

**C. NET OPERATING INCOME (Calendar Year 2025)**

	Residential	Commercial
<b>Total Actual Income less Operating Expenses less Replacement Reserves.....</b>	_____	_____

**D. CAPITAL IMPROVEMENTS, RENOVATIONS**

Has the property had Capital Improvements or Capital Renovations during the reporting period?  
 Yes  No

If yes, please provide total cost here and attach a detailed list of improvements on a separate page. **Reflect only those capital costs that were actually expensed in calendar year 2025.**

Total Capital Cost \_\_\_\_\_

Do you fund a reserve for future capital improvements? Yes No  
 If yes, what is the annual amount? \_\_\_\_\_

**E. MARKET RATE INFORMATION**

1.

1. Unit Type Example: Studio, 1BR, 2BR & den	2. Number of Units This Type	3. Baths		4. January 2024 Market Rent (per month)	5. January 2025 Market Rent (per month)
		Full	Half		

2. Total gross potential rent as of January 1, 2026 from **residential apartments**, assuming 100% occupancy \_\_\_\_\_

**F. CONCESSIONS**

1. Total income loss due to concessions

- a. Total rent loss due to concessions (ex. Reduced or free rent) (2024) \_\_\_\_\_
- b. Total additional income loss due to concessions (ex. Waived/reduced amenity fees, parking, etc). (2024) \_\_\_\_\_

2. Rent concessions being offered as of January of the current year (2025):

- a. **Residential** ..... Unit type \_\_\_\_\_ Amt./Mo. \_\_\_\_\_ Total \_\_\_\_\_
- b. **Commercial/Industrial**..... Unit type \_\_\_\_\_ Amt./Mo. \_\_\_\_\_ Total \_\_\_\_\_

**G. VACANCY INFORMATION**

1. Vacancy for this project as of January 1 of the current year (2026)?

- a. **Residential** \_\_\_\_\_ units or \_\_\_\_\_ % of total units
- b. **Commercial/Industrial** \_\_\_\_\_ units or \_\_\_\_\_ % of total units

2. What was the average vacancy over the past year (2025)?

- a. **Residential** \_\_\_\_\_ units or \_\_\_\_\_ % of total units
- b. **Commercial/Industrial** \_\_\_\_\_ units or \_\_\_\_\_ % of total units

**H. SUBSIDIZED & AFFORDABLE HOUSING INFORMATION**

- a. Is this property a participant in one of the HUD or other low-income housing programs?  Yes  No
  - 221-D-3  221-D-4  236 Section 8 - Project-based program \_\_\_\_\_
  - ADU Program Tenant-based assistance \_\_\_\_\_
  - Other Please Specify \_\_\_\_\_

b. Do you have dedicated set-aside units with the Office of Housing?  Yes  No

Please specify the number of units that are at or below 60% Average Median Income (AMI) \_\_\_\_\_  
 Typical Rent / Unit / Month (range is acceptable) \_\_\_\_\_  
 Please specify the number of units that are for 61% up to 80% Average Median Income (AMI) \_\_\_\_\_  
 Typical Rent / Unit / Month (range is acceptable) \_\_\_\_\_

**I. Has there been a professional appraisal on this real property in the last five years?** Yes No

If yes, appraiser's estimate of value \$ \_\_\_\_\_ Date of value \_\_\_\_\_