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| ST. JOHN'S | FCS – Property Income Questionnaire Hotel/Motel – 2028 Reassessment | Finance and Corporate Services |
| Property Income Questionnaire – Hotel/Motel – 2028 Reassessment | | |

| | |
|----------------------------|------------------|
| Account Information | SECTION 1 |
|----------------------------|------------------|

Parcel ID _____

Property Address _____

Owner Name _____

| | |
|-----------------------------|------------------|
| Building Information | SECTION 2 |
|-----------------------------|------------------|

Hotel/Motel Name _____

Year Built _____ Year Renovated _____

Number of Stories _____ Number of Rooms _____

Level of Service: Limited Select Full

Number of Parking Stalls (indoor/outdoor): _____ Indoor _____ Outdoor

| | |
|--|------------------|
| Property Sale and Appraisal Information | SECTION 3 |
|--|------------------|

Has the property been sold in the last five years: Yes No

If yes, please provide: Sale Date (YYYY-MM-DD) _____ Sale Price _____

Has the property been listed for sale in the last five years: Yes No

If yes, please provide: List Date (YYYY-MM-DD) _____ List Price _____

Has the property been appraised in the last five years (see below): Yes No

Note: If an appraisal has been completed on the subject property within the last 5 years, please forward a copy of the report with this submission. If an appraisal has not been completed within the last 5 years complete the following declaration:

I hereby declare that there has not been an appraisal completed for any purpose on this property in the past five years.

Print Name _____ Date (YYYY-MM-DD) _____

Signature _____

| | |
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| Area Details (if applicable) | SECTION 4 |
|-------------------------------------|------------------|

| Area Details as of December 31st | | |
|--|-------------|-------------|
| | 2024 | 2025 |
| Commercial Leasable Area Occupied (sf) | | - |
| Commercial Leasable Area Vacant (sf) | | |
| Total Commercial Leasable Area (sf) | | |
| Total Meeting/Banquet Space Area (sf) | | |

Details are to be provided by Owners for each of the two (2) years 2024 and 2025 for fiscal or operating year ending. A copy of the Statement of Operations (the Income and Expense portion of the Annual Financial Statements) must accompany this form upon submission.

***Please also include rental info in Section 8.**

Details are provided for: Fiscal Year End Operating Year End

Please provide year end date (YYYY-MM-DD)_____

Occupancy/Rates for Fiscal or Operating Year Ending

| | 2024 | 2025 |
|--------------------------------------|-------------|-------------|
| Available Rooms | | |
| Rooms Sold | | |
| Occupancy (%) | | |
| Rev PAR (Revenue per Available Room) | | |
| Average Daily Room Rate | | |

Gross Operating Revenue

| | | |
|--|--|---|
| Room Sales | | |
| Food and Beverage Sales | | |
| Telephone Income | | |
| Concessions Income (car rentals, gift shop, etc.) | | |
| Meeting Space / Banquet Facilities Income | | |
| Laundry Income | | |
| Parking Income | | |
| VLT (Video Lottery Terminal) Revenue | | |
| Other Income (please specify: _____) | | |
| Commercial Rental Income (if applicable, please complete page 5) | | - |
| Total Gross Revenue Collected | | |

| FCS – Property Income Questionnaire Hotel/Motel – 2028 Reassessment | | Finance and Corporate Services |
|---|------|-----------------------------------|
| Financial Information – Expenses | | SECTION 6 |
| Departmental Expenses for Fiscal or Operating Year Ending | | |
| | 2024 | 2025 |
| Room Expenses | | |
| Food and Beverage Expenses | | |
| Telephone Expenses | | |
| Laundry Expense | | |
| Landscaping, Parking and Snow Removal Expenses | | |
| Concessions Expenses | | |
| Meeting Space / Banquet Facilities Expenses | | |
| Other Departmental Expenses (specify: _____) | | |
| Total Departmental Expenses | | |
| General Expenses | | |
| Management | | |
| Administration | | |
| Wages and Salaries (excl. management, admin, departmental) | | |
| Advertising and Promotion | | |
| Utilities | | |
| Repairs and Maintenance | | |
| Garbage Removal | | |
| Supplies and Services | | |
| Franchise Fees | | |
| Professional Fees – Legal and Audit | | |
| Property Insurance | | |
| Furniture, Fixtures and Equipment Rentals | | |
| Property Taxes | | |
| Water Taxes | | |
| Other (please specify: _____) | | |
| Total General Expenses | | |
| Total Operating Expenses* | | |
| *Before interest on mortgage debt, depreciation or amortization, capital cost allowance and any other non-operating expenses. | | |
| Net Operating Income | | |

Identify Major Renovations or Capital Expenditures

Have there been Capital Improvements or Capital Renovations completed during this reporting period?
If yes, please provide description and cost excluding HST below.

| | | | |
|---|--|---------------------|--|
| Item 1: | | Associated Cost: | |
| Item 2: | | Associated Cost: | |
| Item 3: | | Associated Cost: | |
| Please attach a detailed list if space provided is insufficient | | Total Capital Cost: | |

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| Commercial Rental Information (if applicable) | SECTION 8 |
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Note: If any vacancy exists in property, list square foot area and asking rent for all available space.

| Tenant Type | Location | | Tenant Name or Vacant <i>Including owner occupied if multi-tenant</i> | Lease Start Date YYYY/MM/DD | Lease End Date YYYY/MM/DD | Lease Type | Area (SF) | Contract Rental Rate (PSF) | Overage or Percent Rent (psf) | Recovery Income Collected (PSF) | Total Charges (PSF) | Asking rental rate for vacant space (psf) |
|---|----------|---------|--|-----------------------------------|---------------------------------|---------------------------------------|-----------------|-------------------------------|-------------------------------------|---|---|---|
| | Floor | Suite # | | | | | | | | <i>Operating Expense and Property Tax</i> | | |
| <i>Office (O) Retail (R) Industrial (I) Storage (S)</i> | | | | | | <i>Net, Semi-Gross, Gross</i> | | (A) | (B) | (C) | <i>Total revenue PSF received from tenant (= A + B + C)</i> | <i>Please specify if Net, Semi-Gross or Gross</i> |
| <i>Example 1 - Office</i> | 3 | 301 | <i>ABC Company</i> | <i>2019/01/01</i> | <i>2023/12/31</i> | <i>Net</i> | <i>2,500 sf</i> | <i>\$25.00</i> | <i>\$0.00</i> | <i>\$12.00</i> | <i>\$37.00</i> | <i>n/a</i> |
| <i>Example 2 - Retail</i> | 1 | 101 | <i>Vacant</i> | <i>n/a</i> | <i>n/a</i> | <i>Gross</i> | <i>1,000 sf</i> | <i>n/a</i> | <i>n/a</i> | <i>0.00</i> | <i>n/a</i> | <i>\$35.00 (gross)</i> |
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