



# TOWN OF MONTVILLE

## ASSESSOR'S OFFICE

**Return to:**

Town of Montville Assessor's Office  
310 Norwich-New London Tpke  
Uncasville, CT 06382  
(860) 848-6774  
assessor@montville-ct.org

### Annual Income and Expense Report

**PLEASE READ CAREFULLY AS INSTRUCTIONS  
AND FORMS HAVE BEEN UPDATED**

April 2026

**FILING INSTRUCTIONS** - Under current law, the Assessor's Office is required to reassess all real property in this municipality for the October 1, 2026 Revaluation. In order to assess your real property fairly and equitably, information regarding the income and expenses related to your property is not only required, it is essential. Connecticut General Statutes, Section 12-63c requires all owners of rental property to annually file the enclosed forms. Any information related to the actual rental and rental-related income and operating expenses shall **not** be a public record, and is **not** subject to the disclosure provisions of Connecticut General Statute Section 1-210 (Freedom of Information Act).

**Please complete the enclosed forms and return them on or before June 1<sup>ST</sup>.** In accordance with Connecticut General Statute Section 12-63c(d), any owner of primarily rental real property who fails to file this form by **June 1, 2026**, or files an incomplete or false form with intent to defraud, shall be subject to a one-year penalty assessment equal to a **ten percent (10%) increase in the assessed value of such property**. Pursuant to CGS 12-63c upon determination that there is *good cause*, the assessor *may* grant an extension to not later than the first day of July to submit such information, if the owner of such property files a request for an extension with the assessor **not later than June 1<sup>ST</sup>**.

**GENERAL INSTRUCTIONS** - Each summary page should reflect information for a single property for the year of 2025. If you own more than one rental property, a separate report/form **must be filed for each property in this jurisdiction**. An income and expense report summary page and the appropriate income schedule **must** be completed for each rental property. Income Schedule A must be filed for apartment rental property and Schedule B must be filed for all other rental properties, unless such form indicates otherwise. A computer print-out is acceptable for Schedule A & B as long as all required information is provided.

**Please attach to the completed forms:** 2025 Federal Income Tax Schedule E (FORM 1040); Supplemental Income and Expenses and/or Form 8825; Rental Real Estate Income and Expenses of a Partnership; an S Corporation or Limited Liability Company (LLC) with the Form K-1 attached. **Copies of current lease(s)**. Only tax schedules related to the rental activity are required to be filed. If there is no lease, state that there is **no lease**.

Complete this form for all rented or leased commercial, retail, industrial or mixed-use property. Identify the property and address. **Provide Annual information for the Calendar Year 2025.** **TYPE/USE OF LEASE SPACE:** Indicate what the leased space is being utilized for (i.e.: office, retail, warehouse, restaurant etc.). **ESC/CAM/OVERAGE:** Check if applicable. **ESCALATION:** Amount, in dollars, of adjustment to base rent either pre-set or tied to the Inflation Index. **CAM:** Income received from common area charges to tenant for common area maintenance, or other income received from the common area property. **OVERAGE:** Additional fee or rental income. This is usually based on a percent of sales or income. **PROPERTY EXPENSES & UTILITIES PAID BY TENANT:** Indicate the property expenses & utilities the tenant is responsible for. Abbreviations may be used (i.e.: "RE" for real estate taxes & "E" for electricity). **PARKING:** Indicate number of parking spaces and annual rent for each tenant, include spaces or areas leased or rented to a tenant as a concession. **SPACES RENTED TWICE:** Those rented for daylight hours to one tenant and evening hours to another should be reported under each tenant's name. **OPTION PROVISIONS/BASE RENT INCREASE:** Indicate the percentage or increment and time period. **INTERIOR FINISH:** Indicate whether completed by the owner or the tenant and the cost. **VERIFICATION OF PURCHASE PRICE** must be completed if the property was acquired on or after October 1, 2025.

**WHO SHOULD FILE** - All individuals and businesses receiving this form should complete and return this form to the Assessor's Office. If you believe that you are not required to fill out this form, please call the number listed above to discuss. All properties which are rented or leased, including commercial, retail, industrial and residential properties, except "*such property used for residential purposes, containing not more than six dwelling units and in which the owner resides*" must complete this form. If a property is partially owner-occupied, this report **must** still be filed.

IF YOUR PROPERTY IS 100% OWNER OCCUPIED, OR 100% LEASED TO A RELATED CORPORATION, BUSINESS FAMILY MEMBER OR OTHER RELATED ENTITY, PLEASE INDICATE BY CHECKING THE FOLLOWING BOX. FORM MUST STILL BE SIGNED, DATED, AND RETURNED IN ITS ENTIRETY TO AVOID 10% PENALTY.

**ALL PROPERTY OWNERS MUST SIGN & RETURN THIS FORM TO THE MONTVILLE ASSESSOR'S OFFICE ON OR BEFORE JUNE 1, 2026 OR BE SUBJECT TO THE TEN PERCENT (10%) PENALTY.**

Property:

UID:

**Town of Montville Assessor's Office**

**Mobile Home Park**

**Income and Expense Report for Calendar Year 2025**

**(DUE ON OR BEFORE JUNE 1, 2026)**

Information provided is CONFIDENTIAL, in accordance with Connecticut Law 12-63c.

**Date Stamp**

Property Name (if applicable):

Property Address:

Unique ID:

Form Preparer/Position:

Telephone Number:

Email:

**Park Characteristics**

Number of Sites

Number of Apartments / Cottages

Number of Leasable Mobile Homes

Site / Pad Size

Site / Pad Amenities


**Utilities Available**

Electricity  
Water  
Gas

<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>

YES  
YES  
YES

<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>

NO  
NO  
NO

**Annual Revenue**

Site Rentals

Mobile Home Rentals

Apartment / Cottage Rentals

Gas / Oil Sales & Contracts

Storage / Hauling

Repair Services

Laundry

Utility Charge

Other Income

\$	
\$	
\$	
\$	
\$	
\$	
\$	
\$	
\$	
\$	

**Total Gross Income**

\$

**2025 Vacancy Rate / Credit Losses**

\$

**Effective Gross Income**

\$

Property:

UID:

**Annual Operating Expenses**

Fixed Expenses

Real Estate Taxes	\$	_____
Personal Property Taxes	\$	_____
Rent: Equipment	\$	_____
Insurance	\$	_____
Other _____	\$	_____
<b>Total Fixed Expenses</b>	<b>\$</b>	_____

Variable Expenses

Owners Salary / Management Fees	\$	_____
Administrative ( <i>Salaries, Payroll, etc</i> )	\$	_____
Professional ( <i>Legal, Accounting, etc</i> )	\$	_____
Eviction Expenses	\$	_____
Repairs / Maintenance	\$	_____
Utilities ( <i>heat / light / gas</i> )	\$	_____
Trash Removal	\$	_____
Grounds Maintenance / Snow Removal	\$	_____
Sales / Marketing	\$	_____
Oil / Gas	\$	_____
Other _____	\$	_____
<b>Total Variable Expenses</b>	<b>\$</b>	_____
<b>Total Operating Expenses</b> (Fixed added to Variable)	<b>\$</b>	_____

**Net Operating Income**

(Effective Gross Income less Total Operating Expenses) \$ \_\_\_\_\_

Do any of the figures include capital expenditures or extraordinary costs that vary from typical operating expenses?

YES       NO

**If yes, please explain:**

\_\_\_\_\_  
\_\_\_\_\_

Please provide comments, clarifications, or additional information (attach, if necessary)

\_\_\_\_\_  
\_\_\_\_\_

Signature

Date

Name (Print)

Position

**RETURN ON OR BEFORE JUNE 1, 2026 TO AVOID 10% PENALTY**

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**MOBILE HOME**

Property: \_\_\_\_\_  
UID: \_\_\_\_\_

# VERIFICATION OF PURCHASE PRICE

(Complete if the property was acquired on or after October 1, 2025)

**Return to:**  
Assessor's Office  
310 Norwich-New London Tpke  
Uncasville, CT 06382

PURCHASE PRICE \$ \_\_\_\_\_ DOWN PAYMENT \$ \_\_\_\_\_ DATE OF PURCHASE \_\_\_\_\_  
DATE OF LAST APPRAISAL \_\_\_\_\_ APPRAISAL FIRM \_\_\_\_\_ APPRAISED VALUE \_\_\_\_\_

FIRST MORTGAGE \$ \_\_\_\_\_ INTEREST RATE \_\_\_\_\_ % PAYMENT SCHEDULE TERM \_\_\_\_\_ YEARS  
SECOND MORTGAGE \$ \_\_\_\_\_ INTEREST RATE \_\_\_\_\_ % PAYMENT SCHEDULE TERM \_\_\_\_\_ YEARS  
OTHER \$ \_\_\_\_\_ INTEREST RATE \_\_\_\_\_ % PAYMENT SCHEDULE TERM \_\_\_\_\_ YEARS  
CHATTEL MORTGAGE \$ \_\_\_\_\_ INTEREST RATE \_\_\_\_\_ % PAYMENT SCHEDULE TERM \_\_\_\_\_ YEARS

(Check One)

FIXED	VARIABLE

DID THE PURCHASE PRICE INCLUDE A PAYMENT FOR: FURNITURE? \$ \_\_\_\_\_ (Value) EQUIPMENT? \$ \_\_\_\_\_ (Value) OTHER (Specify) \$ \_\_\_\_\_ (Value)

HAS THE PROPERTY BEEN LISTED FOR SALE SINCE YOUR PURCHASE? (Check One) YES  NO

IF YES, LIST THE ASKING PRICE \$ \_\_\_\_\_ DATE LISTED \_\_\_\_\_ BROKER \_\_\_\_\_

Remarks - Please explain any special circumstances or reasons concerning your purchase (I.e., vacancy, conditions of sale, etc.) or other property information or special circumstance.

**DATE STAMP**


**RETURN TO THE ASSESSOR ON OR BEFORE JUNE 1, 2026 TO AVOID THE 10% PENALTY**