Town of Montville Assessor's Office

Skilled Nursing Facility Income and Expense Report for Calendar Year 2024

(Due June 1, 2025)

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

Property Name	(if applicable):			
Property Addre	ss:			
Form Preparer/	Position:			
Telephone Nun	aher:			
Telephone Ivan	1001.			
<u>General Dat</u>	<u>a</u>			
Number	of Rooms (or Units			
Number	of Licensed Beds			
Potential Gros	s Income (At 100%		1	
Type of Patient		Daily	Census	
		Reimbursement	(# Patient	Annual Income
Private	Private	Rates	Days)	
Pay	Semi-private			
	Wards			
VA	Skilled			
	Intermediate			
НМО	Semi-private			
Medicare	Semi-private			
Medicaid	Semi-private			
Potential Annual Rental Income (Full Occupancy)			\$_	
Ancillary Income:			\$	
Total Potential Gross Income			\$	
Annualized Vacancy and Collection Loss				\$
Effective (Actual) Gross Income				\$

Annual Operating Expenses: Fixed Expenses Real Estate Taxes **Personal Property Taxes** Insurance Variable Expenses Administration/Marketing/Activities Food Service Housekeeping and Laundry Nursing and Personal Care Maintenance & Janitorial Utilities Administrative, Legal & Accounting Management Fees Replacement Reserves (please explain below) **Total Operating Expenses Net Operating Income** Please include a copy of your year end Income Summary. Do any of the figures include capital expenditures or extraordinary costs which vary from typical operating expenses? If yes, explain: Comments or additional Information (may be attached):

Return by June 1, 2025 to avoid 10% assessment penalty

Signature/Position

Town of Montville Assessor's Office 310 Norwich-New London Tpke. Uncasville, CT. 06382