



# Allen County Office Survey

## Allen County Assessor - Stacey O'Day

Rousseau Centre, 1 E Main Street, Suite 415  
Fort Wayne IN 46802  
Ph 260-449-7501 Fax 260-449-3115

ASSESSOR'S OFFICE

### Section A: Owner/Filer Information

Owner Name: \_\_\_\_\_  
Business Name: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
Contact #: \_\_\_\_\_  
E-Mail Address: \_\_\_\_\_

### Section B: Property Information

Complex Name: \_\_\_\_\_  
Property Address: \_\_\_\_\_  
Gross Sq Ft: \_\_\_\_\_  
Parcel(s): \_\_\_\_\_

### Section C: General Information

Property is 100% owner occupied: Yes \_\_\_\_\_ No \_\_\_\_\_  
If the answer is yes, please complete 1st page and return to the above address.  
If the answer is no, please complete the remaining pages and return to the above address.  
Lease Type: Net \_\_\_\_\_ Double Net \_\_\_\_\_ Triple Net \_\_\_\_\_  
Gross Building Square Ft: \_\_\_\_\_  
Net Leasable Square Ft: \_\_\_\_\_

### Section D: Vacancy Information

2021 \_\_\_\_\_ sq ft rentable \_\_\_\_\_ % vacant  
2020 \_\_\_\_\_ sq ft rentable \_\_\_\_\_ % vacant  
Actual loss of income in 2020 from bad accounts: \$ \_\_\_\_\_  
Current market rent per sq ft for vacant space: \$ \_\_\_\_\_

### Section E: Capital Improvements, Renovations

Has the property had Capital improvements or Capital renovations during the reporting period? Yes No  
If yes, please provide a total cost here and attach a detailed list of improvements on a separate page.  
Total Capital Cost: \$ \_\_\_\_\_  
Do you fund a reserve for future capital improvements? Yes No  
If yes, what is the annual amount? \$ \_\_\_\_\_

### Section F: Appraisals & Sales

Appraisal information:  
Has there been a professional appraisal on this real property in the last 5 years? Yes \_\_\_\_\_ No \_\_\_\_\_  
If yes, appraiser's estimate of value \$ \_\_\_\_\_ Date of value: \_\_\_\_\_

### Section G: Sales Information:

Date Acquired: \_\_\_\_\_ Price \_\_\_\_\_  
Date Sold: \_\_\_\_\_ Price \_\_\_\_\_  
Is the property currently available for sale: \$ \_\_\_\_\_

### Section H: Please submit your last three years (2021, 2022, & 2023) Income & Expense Information to complete this filing.

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.

Contact Person: \_\_\_\_\_  
Management Firm (if applicable) \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone: \_\_\_\_\_  
Date: \_\_\_\_\_ Signature: \_\_\_\_\_ Title: \_\_\_\_\_

Office Survey Page 2 Office/Complex Name: \_\_\_\_\_  
 Property Address: \_\_\_\_\_

Tenant List  
 Office # & Location  
 (Basement, 1st, 2nd,  
 etc.)

	Tenant	Square Footage	Annual Rent/Sq Ft	Lease Type