

Instructions:

- 1. Complete Section 1.
- 2. Provide operating history* for the prior two full years ending 12/31 and current year-to-date. This requirement can be satisfied by any of the following options:
 - a. Attach your own itemized operating history for the previous two full years ending 12/31 and current year-to-date. All information requested in Section 2 should be included in the operating history and the attachment must be signed.
 - b. Attach your Schedule E from your Federal Income Tax Return for the last two years and include a year-to-date itemized operating history. The attached Schedule E and the operating history must be signed.
 - c. If an operating history is not available, complete Section 2 of this form.
 - d. If the property is **new** or **newly renovated** and historical information is not available, provide a complete year-to-date operating history from time of construction/renovation and a 12-month pro forma.
 - * For purchase transactions, a seller-provided operating history, signed by the applicant, is required.



Section 1: Property Information Property Address State Zip **Section 2: Operating History** An attached operating history and/or signed Schedule E is acceptable instead of completing the information below. Attachment must contain all the information below, and include signature, date and printed name of the signer. For purchase transactions, a seller-provided Operating History, signed by applicant, is required. 12/31 Year End: 12/31 Year End: Month YTD: **Annual Income Actual Collection** Laundry Income Parking Income Storage Income **Tenant Reimbursed Expenses** Other (please describe): **Total Income Collected Annual Expenses RE Taxes Other Taxes & Assessments** Insurance **Utilities** Mastered metered? Mastered metered? Mastered metered? Fuel/ Gas Water/Sewer Electric Trash Cable/Other Management Resident Manager Payroll Expense Offsite Manager Advertising/Telephone Misc./Licenses Legal/Professional Fees **Building Repair** (excluding capital expenditures) **Building Maintenance** Snow Removal Pest Control Painting and Decorating Cleaning/Supplies Gardener Pool Svc/Elevator Maint **Boiler Maintenance** Other (please describe): **Total Annual Expenses** (excluding capital expenditures) **Net Operating Income** (total income less total annual expenses) Capital Expenditures (non-recurring expenses) Please describe type of capital expenditure (e.g. new roof, complete paint job). **Total Capital Expenditures Total Expenses** (total annual expenses + total capital expenditures) **Section 3: Certification (REQUIRED)** I hereby certify to JPMorgan Chase Bank, N.A., and its successors and assigns, that I have personally prepared and/or reviewed the information herein and on the attached documents, if any, and that to the best of my knowledge it is true and correct. **Applicant's Signature Applicant's Printed Name** Date

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