



TOWN OF HAMDEN

OFFICE OF THE ASSESSOR

Hamden Government Center
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Ross D. Murray, CCMA II
Chief Assessor

Hotel and Motel Income and Expense Supplement for Calendar Year 2014

Information provided is CONFIDENTIAL, in accordance with Connecticut Law.

Property Name (if applicable): _____

Property Address: _____

Form Preparer/Position: _____

Telephone Number: _____

General Data

Available Rooms: # _____

Room Configuration (number of rooms in each category)/Rates

	# Units	Rent/day/unit	Rent/Week/unit
single			
double			
king			
suite			
other			

Annual Occupancy: _____

Annual Average Daily Rate (ADR) \$ _____

Segmentation of Annual Occupancy					
	Transient	Corporate	Group	Other	Total
Percentage of Annual Occupancy					100%
ADR for Segment					

Annual Department Revenue:

Room \$ _____

Conference Facilities \$ _____

Food and Beverage \$ _____

Telephone \$ _____

Minor Operated Departments \$ _____

Miscellaneous Rentals and other Income \$ _____

Total Annual Revenue \$ _____(1)

(Hotel and Motel Cont'd.)

2014 Annual Cost and Expenses:

Rooms	\$ _____
Food and Beverage	\$ _____
Telephone	\$ _____
Minor Operated Departments	\$ _____
Leased Equipment	\$ _____
Administrative, Legal, Accounting	\$ _____
Marketing	\$ _____
HVAC	\$ _____
Property Operation and Maintenance	\$ _____
Total Operating Expenses	\$ _____ (2)
Gross Operating Profit (1 - 2)	\$ _____ (3)
Management Fees	\$ _____ (4)

Fixed Operating Charges:

Real Estate Taxes	\$ _____
Personal Property Taxes	\$ _____
Property Insurance	\$ _____
Reserve for Capital Replacement	\$ _____
Total Fixed Charges	\$ _____ (5)
Income Before Other Fixed Charges¹ (3 - 4 - 5)	\$ _____
Total Number of Room Nights Available in 2014	# _____
Total Number of Room Nights Sold in 2014	# _____

Comments or Additional Information (may be attached):
