



Fiscal Year 2019
38D Property Tax Return
Form PK - Parking Facility
City of Boston Assessing Department
(M. G. L. Chapter 59, Section 38D)

Mail Date: February 22, 2018

Parcel Location:

Parcel ID:

Return Form to:
Research Unit / 38D
Assessing Department
P. O. Box 9712
Boston, MA 02114

Certified Mail Number:

*** Be sure to write the Ward and Parcel number on any document that you submit in response to this request. ***

The following information is requested pursuant to Massachusetts General Law Chapter 59, Section 38D, as amended, in order to determine market income and expense standards and develop fair and equitable valuations. Please submit all requested information within sixty (60) days of the mailing date.

If you fail to comply within 60 days of the request, it may be automatic grounds for dismissal of a filing at the Massachusetts Appellate Tax Board. You may also face a fine of two hundred fifty-dollars (\$250) for commercial and industrial properties. All information submitted is confidential.

PART ONE: Operations and General Information

1. Are these facilities leased to an outside operations company? Yes No
If yes, please provide copy of agreement.
2. Are these facilities managed by an outside company? Yes No
If yes, provide company name: and copy of agreement.
3. # Garage Spaces # Surface Lot Spaces Total # of Parking Spaces
4. Total vehicle entrance and exit count for calendar year 2017:
5. If system provides breakdown of vehicle count, please provide for 2017:
Transient differential count Monthly differential count Event differential count
6. Amenities at this parking facility:
Parking Attendant Security Guard Pay on Foot System Fenced
Electronic Gate Key Card Access Valet Parking Other:
7. Are there designated parking areas for staff, clients, visitors, monthly parkers? Yes No
If yes, what measures does the property owner or lessee take to ensure that the parking designated for staff, clients, visitors, monthly parkers or charitable tenants is reserved exclusively for their use?
8. Posted Rates: Hourly \$ Daily \$ Monthly \$ Event \$

Please note: A rent roll along with an “accrual basis” profit and loss statement may be substituted for the following if all requested information is included.

PART TWO: Parking Income (For Calendar Year 2017)

Source	Designated # Spaces	Annual Collected Income	Comments
Hourly		\$	
Daily		\$	
Monthly		\$	
Event		\$	
Other()		\$	
Other()		\$	
Other()		\$	
TOTAL PARKING INCOME		\$	

(Continued on reverse side)

PART THREE: Other Income (Retail, Office, Storage)

Floor	TENANT	USE	SF	Rent/ SF	Lease Start Date	Lease Terms (years)	Basis (Gr., N, NNN)	Free Rent (mos.)	Fit Out (\$/SF)	Lease Comm. (\$/SF)

PART FOUR: Additional Income: Cell/Wireless Antennas, Conduit, Billboards, Generator, Etc.

Item	Source	Monthly Amount	Annual Collected	Lease Start Date/Term
		\$	\$	
		\$	\$	
		\$	\$	
		\$	\$	
		\$	\$	

PART FIVE: Expenses

LABOR COSTS	
Payroll	\$
Payroll taxes & fringe benefits	\$
Uniforms	\$
Sub-contracted labor	\$
Other personnel costs	\$
Total Labor Costs	
MANAGEMENT FEES	
Base	\$
Variable	\$
Incentive	\$
Total Management Fees	
OTHER EXPENSES	
Cleaning: Contracts, payroll, trash	\$
Licenses, fees, inspections	\$
Repairs & Maintenance	\$
Operating Supplies & Equipment	\$
Building Insurance	\$
Landscaping/Snow Removal	\$
Utilities: Electric, Gas, Oil, Water, Steam	\$
Leasing expenses : Advertising	\$
Leasing expenses : Commissions	\$
Leasing expenses : Tenant Fitout	\$
Replacement Reserve	\$
Extraordinary Expenditures	\$
Other ()	\$
Total Other Expenses	
TOTAL ALL EXPENSES	

PART SIX: Affidavit

I hereby declare under oath that the enclosed information and addenda are presented as being true, correct and complete to the best of my knowledge and belief and are submitted under the pains and penalties of perjury.

PRINT NAME: DATE: / /
SIGNATURE: PHONE: () -