

COUNTY OF FAIRFAX, DEPARTMENT OF TAX ADMINISTRATION, REAL ESTATE DIVISION

**INSTRUCTIONS FOR COMPLETING
INCOME AND EXPENSE SURVEY FORM
GOLF COURSE**

The following instructions are provided to aid you in filling out this survey form. If you have any questions, please call this office at (703) 324-4802.

A. Property Identification

1. Please provide the property name, year built and any addition years.
2. Please provide the type of property (office, retail, etc), # of elevators and # of stories.
3. Please provide the address of the property.
4. Please provide the 'Trading as' name reported on your business license. Do you have owner occupied space in the building and if so please provide the amount of square feet you occupy.
5. Please provide the total building area of the property including basement and mezzanine space but not parking space.
6. Please provide the total leasable area of the property.
7. Please provide the total basement area of the property. Provide the finished, unfinished, and parking area too.
8. Please provide the total number of parking spaces.
9. Please provide the total reserved/rental parking spaces.

B. Debt Service Information

Please provide information in regard to any loan placed on this property within the last five years. Please include any new loans or refinancing of original debt. This information is requested to analyze financing trends and assists in determining typical debt coverage ratios for income producing property.

C. Basic Information

1. Circle the correct type of golf course.
 - a. Public: A "Public" course is a course which is open to the general public and does not restrict play to those who own memberships, pay dues, or own shares in the club.
 - b. Semi-Private: A "Semi-Private" course is a course which is open to the general public, but also sells memberships in the club. These memberships are often sold as yearly memberships, and allow such members to reserve tee times, and save money if they are frequent players.
 - c. Private: A "Private" course is a course which restricts play to those people who have memberships in the club. These memberships typically require the payment of an initiation fee, and payment of yearly dues.
2. Enter the total number of full rounds played annually. A round is defined as eighteen holes of golf. If nine hole rounds are played, please count two of these rounds as one full round.
3. Enter the greens fee charge for a full round of golf. Please enter both the weekday and weekend rate.
4. Enter the number of weekend rounds played annually.
5. Enter the number of rounds in which carts were rented. Please denote the number of weekday and weekend cart rounds.
6. Enter the cart rental fee for both weekday and weekend.

D. Membership Information

1. – 2. Many clubs have different levels of memberships. Usually, the full golf membership includes the right to use all of the facilities (e.g., tennis, pool, health equipment, etc.) that the club has to offer. In addition, many clubs offer lesser memberships which allow partial use of the facilities. The purpose of this section is to list the different membership types that your club offers, the number of such members, and the annual dues which each membership type requires during the reporting period.

E. Annual Income (Round numbers, no decimals)

1. **Golf membership dues** – Enter the actual income received from the collection of golf membership dues during the reporting period.

CONFIDENTIAL

Property Name	Tax Map ID	Element No.	Property Type

2. **Interest income** – Income of this property from interest earned on capital improvement or reserve accounts, monthly management operating accounts, and bank deposits including CD’s and treasury notes. Include interest earned from initiation fee accounts.
3. **Other membership dues** – Enter the actual income received from the collection of all other membership dues during the reporting period.
4. **Greens fees** – Enter the actual income received from all greens fees during the reporting period.
5. **Cart rental income** – Enter the actual income received from all cart rental fees during the reporting period.
6. **Food and beverage** – Enter the actual income received from the sale of food and beverages during the reporting period. This income may include special events in addition to the daily restaurant and snack bar sales. (If you typically separate income derived from special events (e.g., weddings, parties, or other catered affairs) from daily restaurant operation, you may list this income below under “Other Income,” but please specify type of income.
7. **Pro shop** – Enter the actual income received from sales and services provided by the pro shop during the reporting period.
8. **Driving range income** – Enter the actual income received from the driving range for the reporting period.
9. **Tennis and pool incomes** – Enter the actual income received from all tennis and pool fees for the reporting period.
10. **Other rental income** – Income from rental of miscellaneous items.
11. **Miscellaneous income** – Enter the income derived from sources which are not covered by any of the preceding categories. Please specify source of income.
12. **Total actual income** – Sum of all income items.

F. Capital Improvements, Renovations

Capital expenditures are investments in remodeling or replacements that materially add to the value of the property, or appreciably prolong its economic life. Generally, expenditures on materials or equipment with a life of more than one year should be considered capital and included here. If this section applies to your property, please answer yes and list on an attached sheet the items considered to be capital improvements. Enter the total amount of the capital cost for this reporting period only. For each line enter a description of the improvements, the total cost and the life of the improvements in years. The life of the improvements is the number of years the improvement will last, or the number of years over which it will be amortized. This section helps to compile accurate maintenance expenses data.

New Construction - Submit most recent AIA Documents G702 and G703 with the itemized construction costs and all associated soft costs.

Property Name	Tax Map ID	Element No.	Property Type

G. Annual Operating Expenses

These are expenses necessary to maintain the production of income from operation of the property. Do not include under any expense category items such as ground rent, mortgage interest or amortization, depreciation, personal property tax, income taxes, or capital expenditures. These are not operating expenses. Capital expenditures include investments in remodeling, or replacements which materially add to the value of the property or appreciably prolong its life. Capital expenditures are requested in Section F. Please include here all other expenses to the property. Round your numbers, no decimals

1. Golf Course Operations

- a. **Payroll** – Include payroll expenses of full and part time staff involved with the daily operation of the golf course.
- b. **Supplies and services** – Include expenses of supplies and services used in the routine operation of the golf course. Do not include services covered under annual services contracts, which are included below.
- c. **Golf cart leasing** – If golf carts are not owned by the club, but are leased, report the annual cost of leasing the carts. In parenthesis, please indicate the number of carts leased.
- d. **Driving range** – Enter the annual costs of running the driving range not included elsewhere.
- e. **Pro shop** – Enter the annual costs involved with the running of the pro shop, including the cost of goods sold.
- f. **Miscellaneous** – Enter any expenses incurred in the operation of the golf course, which are not included elsewhere.

2. Food and Beverage

- a. **Payroll and benefits** – Enter payroll and benefit costs of staff involved with selling of food and beverages.
- b. **Supplies and services** – Enter the costs of supplies and services incurred with the selling of food and beverages. Do not include contract services which are listed below.
- c. **Miscellaneous** – Expenses incurred in the selling of food and beverages, which are not included in other categories.
- d. **Sub-total** – Sum of above lines of Golf Course operations and food and beverage.

3. Utilities

- a. **Water and sewer** – Cost of water and sewer services for the reporting period.
- b. **Electricity** – Electricity expenses for the reporting period.
- c. **Other (utility)** – If more than one type of fuel is used, indicate type and total cost.

4. Maintenance and Repair

- a. **HVAC repairs** – Maintenance and repairs expenses for heating, ventilating and air conditioner. Do not include capital repairs.
- b. **Electric/plumbing** – Maintenance expenses for electric and plumbing systems.
- c. **Elevator repairs** – Maintenance expenses for elevator repairs.
- d. **Roof repairs** – Include repairs and routine maintenance expenses here. Do not include cost to replace entire roof or major portion thereof. Those costs should be shown as a capital improvement under Section F.

Property Name	Tax Map ID	Element No.	Property Type

- e. **Pool, tennis/recreation** – Include routine repairs and maintenance items involving the swimming pool and tennis courts.
 - f. **Common area/exterior** – Include repairs of the outside of the property not covered elsewhere. Do not include capital items.
 - g. **Decorating** – Include the cost of repairs for interior items. Do not include capital items.
5. Management and Administrative
- a. **Management fees** – Enter amount paid to a management company or to on-site manager or managers compensated for the management of the facility. Do not include costs which are shown elsewhere on the form.
 - b. **Other administrative/payroll**– Include costs for advertising, administrative payroll, office supplies, accounting and legal fees.
6. Service Contract
- a. **Janitorial/cleaning** – Janitorial and cleaning expenses for the property.
 - b. **Landscaping**– Landscaping or grounds keeping service expenses (do not include greens keeping if included elsewhere.)
 - c. **Trash** – Expense for trash service.
 - d. **Security** – Expense for security service, guards, etc.
 - e. **Window cleaning** – Expenses for window cleaning service.
 - f. **Snow removal** – Expense for snow removal service.
 - g. **Other services** – Any other service expenses not included in other categories. Please specify the expense type.
7. Insurance and Taxes
- a. **Insurance** – (reporting period only) Some insurance policies are multi-year contracts. Please include only one year's cost.
 - b. **Other taxes, fees, HOA** – This includes business license tax, personal property taxes, and other taxes, exclusive of real estate taxes.
 - c. **Total expenses before real estate taxes** – Sum of lines from column B.

H. Net Operating Income before Real Estate Taxes

Total Income – Total Expenses

I. Real Estate Taxes

Amount paid in real estate taxes for this reporting period. This should reflect any adjustments made in the assessment for the period. Do not include personal property taxes.

Property Name	Tax Map ID	Element No.	Property Type

J. Certification

Certification of this information by the owner or officially authorized representative is required by state law (Code of Virginia 58.1-3294). A copy of this code will be provided upon request. Please print or type the name and title of the person certifying the information. Also, provide the name and phone number of the person to contact with questions about the information. Indicate the type of accounting method employed in completing this survey.



County of Fairfax, Department of Tax Administration

12000 Government Center Pkwy., Suite 357
Fairfax, Virginia 22035-0032

<https://www.fairfaxcounty.gov/taxes/real-estate>
DTAREDSurveys@fairfaxcounty.gov | 703-222-8234 (TTY 711)

Golf Course Income and Expense Survey - Real Estate Division

Calendar Year 2023

For Tax Year 2025

Instructions

Instructions are found as a supplemental document as noted above. Please read these instructions and confirm the statement below before completing your survey.

"I have read and understand the survey instructions."

A. Property Identification

Property Name		Owner/Agent	No Longer Owns Property
Tax Map ID	Element No.	Property Type	

Please list all additional elements included in the income and expense data.

Property Location

Street #	Street Name	Direction	Suffix
City			Zip/Postal Code

Property Improvement Information

Owner Occupied Yes No		Owner Occupied SF			
Year Built	Year Addition	Total Building Area	Total Leasable Area	Total Basement Area	
Year Renovated		Finished Bsmt Area	Unfinished Bsmt Area	Bsmt Parking Area	
No. Stories	No. Elevators	No. Parking Spaces	No. Reserved/Rental Parking Spaces		

B. Debt Service Information (within the last 5 years)

	Loan Amount	Loan Date	Term	Interest Rate %	Payment (P & I)	Payment Frequency (Mo. or Year)
1						
2						

FOR INTERNAL USE ONLY

Initial	Date	Click or tap to enter a date.	<input type="checkbox"/> Entered into IAS	<input type="checkbox"/> Added to IDOCS
---------	------	-------------------------------	---	---

CONFIDENTIAL

Property Name	Tax Map ID	Element No.	Property Type

C. Basic Information

Is your golf course:	<input type="checkbox"/> Public <input type="checkbox"/> Semi-private <input type="checkbox"/> Private
# of rounds played annually	
Greens fees for a full round	Weekday Weekend
How many of the total rounds were weekend rounds?	
How many of the rounds listed above include carts rented?	Weekday Weekend
Cart rental fee	Weekday Weekend

D. Membership Information

As of	
# of full golf memberships	
a) Individual	Annual dues
b) Family	Annual dues
Other membership types (specify and list number)	
a) #	Annual dues
b) #	Annual dues
c) #	Annual dues

Property Name	Tax Map ID	Element No.	Property Type

E. Annual Income (round numbers, no decimals)

Income for Period	to		
Golf Membership Dues			
Interest Income (include interest from initiation fees)			
Other Membership Dues			
Greens Fees			
Cart Rental Income			
Food & Beverage			
Pro Shop			
Driving Range Income			
Tennis & Pool Income			
Other Rental Income (specify)			
Miscellaneous Income (specify)			
Miscellaneous Income (specify)			
<i>Total Actual Income (sum of above lines)</i>			

F. Capital Improvements, Renovations

<p>Have there been Capital Improvements or Capital Renovations to the property during this reporting period?</p> <p>If yes, please provide total cost here and attach a detailed list on a separate page.</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No
---	--

New construction: Submit most recent AIA Documents G702 and G703.

Property Name	Tax Map ID	Element No.	Property Type
G. Annual Operating Expenses			
Golf Course Operations and Food & Beverage			
Golf Course Operations Payroll			
Golf Course Operations Supplies and Services			
Golf Cart Leasing			
Driving Range			
Pro Shop			
Misc. Operations (specify)			
Misc. Operations (specify)			
Food & Beverage Payroll and Benefits			
Food & Beverage Supplies and Services			
Food and Beverage Misc. (specify)			
<i>Golf Course Operations and Food & Beverage Sub-total (sum of above)</i>			
Utilities. Maintenance, Management, etc.			
Water and Sewer			
Electricity			
Other Utilities (specify)			
HVAC Repairs			
Electric/Plumbing Repairs			
Elevator Repairs			
Roof Repairs			
Pool/Tennis/Recreation			
Common Area/Exterior Repairs			
Decorating			
Management Fees			
Other Administrative/Payroll			
Janitorial			
Landscaping			
Trash			
Security			
Window Cleaning			
Snow Removal			
Other Services (specify)			
Insurance (One Year)			
Other Taxes, Fees, HOA (Do not include Real Estate Taxes)			
<i>Total Expenses Before Real Estate Taxes</i> <i>sum of above Operating Expenses</i>			
H. Net Operating Income <i>Total Actual Income Less Total Expenses</i>			
I. Real Estate Taxes			

Property Name	Tax Map ID	Element No.	Property Type

ADDITIONAL COMMENTS
Please include any details you feel are necessary for the valuation of this property:

ELECTRONIC SURVEYS
Please enter the preferred email for surveys to be sent to (if applicable):

J. CERTIFICATION			
OFFICIAL REQUEST: TITLE 58.1-3294 CODE OF VIRGINIA State law requires certification by the owner or officially authorized representative			
Name of Management Company		Contact Person	
Street#	Street Name/P.O. Box	Direction	Suffix
2 nd Line of Address			
Unit/Suite/Floor	City	State/Country	Zip/Postal Code
Phone Number		Email Address	
All information including the accompanying schedules, statements, and attachments have been examined by me and to the best of my knowledge and belief are true, correct, and complete.			
Signature		Date	
Print Name		Title	