

**** CONFIDENTIAL ****
WILLIAMSON COUNTY, TENNESSEE
PROPERTY ASSESSOR'S OFFICE

1320 West Main Street, Suite 300
Franklin, Tennessee 37064
(615) 790-5708

Brad Coleman
Assessor of Property

Williamson County
Tennessee
www.williamsoncounty-tn.gov

GOLF COURSE INCOME AND EXPENSE QUESTIONNAIRE

ALL INFORMATION FURNISHED BY THE PROPERTY OWNER WILL BE FOR THE USE OF THE WILLIAMSON COUNTY OFFICE OF THE PROPERTY ASSESSOR. UNDER THE AUTHORITY OF THE TENNESSEE COURT RULES ANNOTATED, RULES OF CIVIL PROCEDURE 34.01, THIS INFORMATION WILL BE REQUESTED AS APPLICABLE IN HEARINGS BEFORE THE STATE BOARD OF EQUALIZATION. ALL DATA FURNISHED WILL REMAIN CONFIDENTIAL IN ACCORDANCE WITH 67-5-402 OF THE TENNESSEE TAX CODE ANNOTATED, AND WILL NOT APPEAR ON ANY DOCUMENTS THAT ARE AVAILABLE TO THE PUBLIC.

PLEASE COMPLETE AND RETURN TO THE ABOVE ADDRESS BY

May 1

List all Map and Parcel numbers in this statement _____

Accounting Period: **Beginning** Month _____ Year _____ **Ending** Month _____ Year _____

Name of Project: _____

Property Address: _____

Name of Owner: _____

Name of Agent / Management Firm: _____

Address of Agent / Management Firm: _____

Does the Agent / Management Firm have an ownership in the property? YES or NO (please circle)

Are any operating expenses paid to persons with an ownership interest? YES or NO (attach explanation if YES)

NOTE: Income and Expense information will not be considered valid unless signed and dated by owner or officer of the corporation or an authorized agent as requested below. **IMPORTANT: AGENTS AND PROPERTY MANAGERS MUST ATTACH EXPRESS WRITTEN AUTHORITY FROM OWNER TO SIGN THIS FORM.**

ALL OF THE INFORMATION PROVIDED HEREIN HAS BEEN EXAMINED BY ME AND IS TRUE, CURRENT AND COMPLETE, TO THE BEST OF MY KNOWLEDGE.

Name: _____
(Please print)

Signed _____
(Signature of Owner or Authorized Agent)

Title _____

Company _____

Telephone Number (_____) _____ Date _____

GENERAL CLUB DATA

Club Member Type (please choose one) Public Private

Golf Course Type Par 3 Executive Championship

Number of Holes Total Yardage

Year Course Opened Course Architect

Amenities available at club (please check all that apply):

Clubhouse Dining Room

Driving Range Pool

Tennis Courts Fitness Center

Other (please explain)

MEMBERSHIP INFORMATION

Number of Memberships Single Family Corporate Social

Rounds Played (annually) Member Non-Member Group/Tournament

MEMBERSHIP FEE STRUCTURE

Average Initiation Fee \$ Single \$ Family \$ Senior \$ Corporate

Is any portion of the Initiation Fee refundable? If Yes, what percentage

Monthly Dues \$ Single \$ Family \$ Senior \$ Corporate

Non-Member Guest Fee \$ Does this fee include a cart? Yes / No

Typical Group / Tournament Guest Fee \$

Membership Cart Fee per Round \$

PLEASE USE THE SPACE BELOW TO INCLUDE ANY OTHER INFORMATION ABOUT YOUR CLUB THAT YOU BELIEVE IS IMPORTANT:

GROSS REVENUE

Membership
Initiation Fees \$ _____

Membership Dues \$ _____

Golf Revenue
Guest Greens Fees \$ _____

Cart Fees

Member \$ _____

Non-Member \$ _____

Driving Range \$ _____

Pro Shop Revenue \$ _____

Other Revenue \$ _____

Please Explain Other Revenue

TOTAL REVENUE **\$**

COST OF GOODS SOLD

Pro Shop – COGS \$ _____

Food & Beverage – COGS \$ _____

TOTAL COGS \$ _____

EXPENSES

Payroll

Course Maintenance Payroll \$ _____

General & Administrative Payroll \$ _____

Course Maintenance \$ _____

Pro Shop \$ _____

Food & Beverage \$ _____

General & Administrative \$ _____

Marketing \$ _____

Insurance \$ _____

Utilities \$ _____

Management Fee \$ _____

Other Maintenance \$ _____

Capital Improvements \$

NOTES: