

Lower Example Apartment  
 Example Cottage  
 1 Example Street  
 Example Parish EG 01

012345678

Carefully read over the below questions and follow the instructions to correctly complete the form in respect of the above valuation unit.

<p><b>1) Occupation - Please tick <u>one</u> box specifying whether this unit is:</b></p> <p>a) Owner-occupied <input type="checkbox"/></p> <p>b) Occupied/Rented by a relative/employee <input type="checkbox"/></p> <p>c) <b>Rented</b> <input checked="" type="checkbox"/></p> <p>d) Vacant <input type="checkbox"/></p> <p style="text-align: center; color: blue;"><b>PROCEED TO QUESTION 2</b> </p>	<p><b>2) Indicate:</b></p> <p>a) # of Bedrooms <input style="width: 40px; border: 1px solid black;" type="text" value="3"/> # of Bathrooms <input style="width: 40px; border: 1px solid black;" type="text" value="2.5"/></p> <p>or tick if a Studio Unit <input type="checkbox"/></p> <p>b) if the property has: (please tick what applies)</p> <p>Private Beach <input type="checkbox"/> Boat Slip <input checked="" type="checkbox"/> Dock/Jetty <input type="checkbox"/></p> <p>Pool <input checked="" type="checkbox"/> Sauna <input type="checkbox"/> Squash Court <input type="checkbox"/></p> <p>Tennis Court <input type="checkbox"/></p>
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➤ If you ticked c) Rented in Question 1, please proceed to Question 3.  
 ➤ Otherwise, you need only to complete the Declaration at the end.

<p><b>3) Trust Information:</b></p> <p>a) Is the property held in Trust? <input type="checkbox"/></p> <p>b) If Yes, is the tenant a settlor of the Trust, beneficiary or related to the same, or in any way connected to the Trust? <input type="checkbox"/></p>	<p>Yes <input checked="" type="checkbox"/> No <input type="checkbox"/></p> <p>Yes <input type="checkbox"/> No <input checked="" type="checkbox"/></p>
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➤ If you ticked Yes to both parts a) and b) in Question 3, you need only complete the Declaration at the end.  
 ➤ Otherwise, please proceed and complete Questions 4 – 7 and the Declaration at the end.

<p><b>4) Rent Details - Please state:</b></p> <p>a) The current rent paid by the tenant.</p> <p>b) The date when this rent was first payable.</p> <p>c) The date the tenant first occupied this unit.</p> <p>d) Length of the tenant's lease and the date it commenced.</p> <p>e) Whether this unit was rented to the tenant through a real estate agent and if so, state real estate Company name.</p> <p>f) If the rent was approved/set by the Rent Commissioner.</p>	<p><u>\$ 8,400 per month</u></p> <p><input style="width: 60px; border: 1px solid black;" type="text" value="04/2019"/></p> <p><input style="width: 60px; border: 1px solid black;" type="text" value="04/2019"/></p> <p><u>3</u> years <input style="width: 60px; border: 1px solid black;" type="text" value="04/2019"/></p> <p>Yes <input checked="" type="checkbox"/> Company <u>Coldwell Banker</u> No <input type="checkbox"/></p> <p>Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Don't Know <input type="checkbox"/></p>
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<p><b>5) Additional Units included in Rent:</b></p> <p>a) Does the tenant rent more than one unit at the property?</p> <p>b) If Yes, does the rent in 4a. above include the extra unit(s)?</p> <p>c) If Yes, provide the assessment number(s) for the extra unit(s).</p>	<p>Yes <input type="checkbox"/> No <input checked="" type="checkbox"/></p> <p>Yes <input type="checkbox"/> No <input checked="" type="checkbox"/></p> <p>Assessment #(s) _____</p>
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<p><b>6) Furnishings:</b>                  Does the tenant's rent in 4a. above include the following:</p>	<p>Appliances Only <input checked="" type="checkbox"/></p> <p>Furniture (full) <input type="checkbox"/> Furniture (partial) <input type="checkbox"/></p>
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<p><b>7) Tenant's Improvements:</b></p> <p>a) Give details of any major works the tenant has done to this unit and the date e.g. added a swimming pool in 2013.</p> <p>b) Were the works a condition of the lease?</p> <p>c) If any lump sum, other than the deposit, was paid by the tenant at the start of the lease, please give details.</p>	<p><u>N/A</u></p> <p>Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>Amount \$ _____</p>
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**8) Responsibilities:**  
 Is the Landlord or Tenant responsible for the following (please tick):

	Internal Repairs	External Repairs	Land Tax	Electricity	Gardening	Maid / Cleaning	Internet / Wi-Fi
Landlord		✓	✓		✓		
Tenant	✓			✓		✓	✓

**DECLARATION:** It is an offence to submit false information and such offence is punishable by a fine and/or imprisonment.  
 I declare the above particulars are true as owner / tenant / agent / trustee (please circle as appropriate)

Signed Erica Example Date 1 / 10 / 2019  
 Day Month Year

Print name Ms. Erica Example

Email address E.Example@eg.com Daytime phone #(s) 123-4567 (wk) / 987-6543 (cell)

**Thank you for completing this form. Please return it in the enclosed pre-paid envelope.**