

**Address of Condominium**

**Assessment Number**

Example Unit #1  
 Example Condominiums  
 11 Example Street  
 Example Parish EG 01

**\*023478912\***

**Carefully read over the below questions and follow the instructions to correctly complete the form in respect of the above condominium 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><b>c) Rented</b> <input checked="" type="checkbox"/></p> <p>d) Vacant <input type="checkbox"/></p> <p style="text-align: center;"><b>PROCEED TO QUESTION 2</b> →</p>	<p><b>2. Indicate:</b></p> <p>a) # of Bedrooms <input style="width: 50px; text-align: center;" type="text" value="2"/> # Bathrooms <input style="width: 50px; text-align: center;" type="text" value="2.5"/></p> <p>b) If <u>vacant</u> and available for rent, the current asking rent is \$_____ per month</p>									
<p>➤ If you ticked c) Rented in Question 1, please proceed to Question 3.                  ➤ Otherwise, you need only to complete the <b>Declaration</b> at the end.</p>										
<p><b>3. Trust Information:</b></p> <p>a) Is the condominium held in Trust? Yes <input type="checkbox"/> No <input checked="" 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? Yes <input type="checkbox"/> No <input type="checkbox"/></p>										
<p>➤ If you ticked Yes to <b>both</b> parts a) and b) in Question 3, you need only complete the <b>Declaration</b> at the end.                  ➤ Otherwise, please proceed and complete <b>Questions 4 – 7</b> and the <b>Declaration</b> at the end.</p>										
<p><b>4. Rent Details - Please state:</b></p> <p>a) the current rent paid by the tenant. <u>\$ 4,400 per month</u></p> <p>b) the date when the current rent was first payable. <input style="width: 80px; text-align: center;" type="text" value="04/2019"/></p> <p>c) the date the tenant first occupied this unit. <input style="width: 80px; text-align: center;" type="text" value="04/2019"/></p> <p>d) length of the tenant's lease and the date it commenced. <u>3 years</u> <input style="width: 80px; text-align: center;" type="text" value="04/2019"/></p> <p>e) any lump sum, other than the deposit, made by the tenant at the start of the lease. \$ <u>N/A</u></p> <p>f) whether this unit was rented to the tenant through a real estate agent and if so, state Company name. Yes <input checked="" type="checkbox"/> Company <u>Coldwell Banker</u> No <input type="checkbox"/></p> <p>g) the monthly or quarterly maintenance fee. \$ _____ per month or <u>\$2,000 per quarter</u></p> <p>h) if the rent was approved/set by the Rent Commissioner. Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Don't Know <input type="checkbox"/></p> <p>i) the rent paid prior to the current rent (if known). <u>\$ 5,000 per month</u> Don't Know <input type="checkbox"/></p> <p>j) the date when the prior rent was first payable (if known). <input style="width: 80px; text-align: center;" type="text" value="04/2015"/> Don't Know <input type="checkbox"/></p>										
<p><b>5. Responsibilities:</b>                  Is the Landlord or Tenant responsible for the following:</p>	<table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 60%;"></th> <th style="width: 20%; text-align: center;">Landlord</th> <th style="width: 20%; text-align: center;">Tenant</th> </tr> </thead> <tbody> <tr> <td><b>Land Tax</b></td> <td style="text-align: center;"><input checked="" type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td><b>Maintenance Fee</b></td> <td style="text-align: center;"><input checked="" type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> </tbody> </table>		Landlord	Tenant	<b>Land Tax</b>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<b>Maintenance Fee</b>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
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<b>Land Tax</b>	<input checked="" type="checkbox"/>	<input type="checkbox"/>								
<b>Maintenance Fee</b>	<input checked="" type="checkbox"/>	<input type="checkbox"/>								
<p><b>6. Furnishings:</b>                  Does the tenant's rent include the following:</p>	<p>Appliances Only <input type="checkbox"/></p> <p>Furniture (full) <input type="checkbox"/> <b>Furniture (partial)</b> <input checked="" type="checkbox"/></p>									
<p><b>7. Services:</b>                  Indicate any additional services included in the tenant's rent, other than those covered by the maintenance fee.</p>	<p>Electricity <input type="checkbox"/> Maid/Cleaning <input type="checkbox"/></p> <p>Cable TV <input type="checkbox"/> <b>Internet/Wi-Fi</b> <input checked="" type="checkbox"/></p> <p>Other _____</p>									

**Thank you for completing. Please sign the Declaration below and return the form in the pre-paid envelope.**

**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)