

ACCOMMODATION QUESTIONNAIRE 2024 WHANGAREI DISTRICT COUNCIL REVALUATION



Property known as _____ (E.g. Seafarers Motel)

Valuation Ref No:

Property Location:

LEASE DETAILS (if applicable) Does the rental figure advised below include GST: YES / NO (please circle one)

Year Lease Established	Term of Lease	CURRENT RENT	DATE OF LAST RENT REVIEW	Rent Review Periods (2 or 3 yearly etc.)

SUMMARY OF ACCOMMODATION AVAILABLE

(Typical mid-season rate per night **excluding** extras such as breakfast)

Type of Units	Studio	One Bedroom	Two bedroom	Three bedroom	Other Units	Restaurant	Breakfast Room	Conference Room	Other Major Buildings
Number of Units						Yes / No	Yes / No	Yes / No	
Please also complete the following tariff details if you are happy to do so.									
Average Room Rate	\$	\$	\$	\$	\$				

OCCUPANCY RATE (Typical rate over recent years) _____%

What are the earthquake strengthening requirements of the building, if any? (please comment below)

Have there been any significant changes (including earthquake strengthening) made to the property over the last three years? (please comment below)

Completed by:

Please print name clearly

Company:

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Daytime Phone:

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Mobile:

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Please return completed questionnaire by EITHER, **EMAIL** to info.revaluationsnz@opteonsolutions.com OR **POST** to Tenancy 3, Level 14, 5-7 Byron Ave, Takapuna New Zealand.