



Ms D Woods  
Woods and Company  
Kilcullen Road  
Naas  
Co Kildare



## Revaluation Information Form

**You may complete this form on line at [www.valoff.ie](http://www.valoff.ie)**

Property Number  
9923456

PIN Code  
AB19

(Please use a black pen to complete the form.)

Valuation Office Property No: 9923456 PIN Code: AB19

National Revaluation Programme – Kildare County Council

Dear Ratepayer,

The Commissioner of Valuation has signed a Valuation Order for the Kildare County Council area and the revaluation of all commercial and industrial properties for rates purposes in that local authority area has now commenced.

The revaluation will take account of rental values in your local authority area and will result in a more equitable distribution of commercial rates among ratepayers. The revaluation will not increase the total rates revenue raised by Kildare County Council.

A Valuation Manager will assess the value of your property and set a valuation in line with rental values in your area at the valuation date of 30<sup>th</sup> October 2015. It is envisaged that the new valuations will be published in September 2017 and come into effect for rating purposes from 2018 onwards.

Take notice that pursuant to section 46 of the Valuation Act 2001, as amended by the Valuation (Amendment) Act 2015, you are legally obliged to complete a **Revaluation Information Form** within 28 days from the date of this letter. A person who fails to comply with this requirement or who provides information which is false in a material respect, knowing it to be so false or reckless as to whether it is so false, shall be guilty of an offence and liable to a Class A fine. Please complete the Revaluation Information Form on line by visiting [www.valoff.ie](http://www.valoff.ie) and using the **Property No and PIN Code** printed above. Alternatively, you may complete the attached copy of the Form and return it by post using the enclosed Business Reply Envelope.

The information you provide will be kept confidential and will be used by the Valuation Office for the purposes of the valuation process only.

Also enclosed is an Explanatory Guide about the revaluation. Further information is available on the Valuation Office website [www.valoff.ie](http://www.valoff.ie).

If you have any queries in relation to the completion of the Revaluation Information Form, or otherwise, you can contact the **Revaluation Helpline** by emailing [Reval2017@valoff.ie](mailto:Reval2017@valoff.ie) or by telephoning **01 817 1033** or LoCall **1890 531 431**.

Yours faithfully,

Declan Lavelle  
Head of Valuation Services

Tá leagán Gaeilge den doiciméad seo ar fáil. Seol r-phost chuig [Reval2017@valoff.ie](mailto:Reval2017@valoff.ie) nó glaoigh ar 01 817 1033 nó LoCall 1890 531 431.

### 1. Occupiers Details:

Trading Name

A. [Grid for Trading Name]

Contact Name

B. [Grid for Contact Name]

Telephone No

C. [Grid for Telephone No]

Email

D. [Grid for Email]

Name of Managing Agent (if any)

E. [Grid for Managing Agent]

### 2. Ownership Of Premises:

Do you own these premises?

☐ Yes

☐ No

If "Yes", and you purchased the premises within the past five years, please give:

Date Of Purchase:

[Grid for Date]

(mm/yyyy)

€

[Grid for Price]

Purchase Price

### 3. Landlord's Details:

Landlord's Name

[Grid for Landlord's Name]

Address

[Grid for Address]

[Grid for Address]

[Grid for Address]

Are you connected to the Landlord?

☐ Yes

☐ No

If "Yes", Please indicate:

☐ Family

☐ Business

☐ Other

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## Revaluation Information Form

(Please use a black pen to complete the form.)

### 4. Lease Details: (Where the property is Leased)

- A. Commencement date of current lease:  /  (mm/yyyy)
- B. Length of lease: (For example, 9 years /25 years)  Years  Months
- C. Rent review period: (For example, every 5 years)  Years
- D. Date of last review:  /  (mm/yyyy)
- E. Annual rent agreed at last review or start of lease: €  ,  ,
- F. Is this the rent you currently pay: ☐ Yes ☐ No
- G. If "No", state current rent payable per annum (exVAT): €  ,  ,
- H. Date of next break clause if any:  /  (mm/yyyy)

### 5. Who is responsible for payment of? (Fill the appropriate boxes)

- |                        |                                   |                                 |                               |
|------------------------|-----------------------------------|---------------------------------|-------------------------------|
| A. External repairs:   | <input type="checkbox"/> Landlord | <input type="checkbox"/> Tenant | <input type="checkbox"/> Both |
| B. Internal repairs:   | <input type="checkbox"/> Landlord | <input type="checkbox"/> Tenant | <input type="checkbox"/> Both |
| C. Building Insurance: | <input type="checkbox"/> Landlord | <input type="checkbox"/> Tenant | <input type="checkbox"/> Both |
| D. Rates:              | <input type="checkbox"/> Landlord | <input type="checkbox"/> Tenant | <input type="checkbox"/> Both |

### 6. Rent Free Period:

- Was there a rent free period at the start of your Lease? ☐ Yes ☐ No
- If "Yes", how long was the rent free period?  Years  Months

### 7. Premium Details:

- A. Did you pay a premium at the start of your lease? ☐ Yes ☐ No
- B. Did you receive a premium at the start of your lease? ☐ Yes ☐ No

*NB. A premium is a capital sum paid over and above the rent agreed. It does not relate to monies paid in respect of fixtures, fittings, stock or goodwill etc.*

If you did pay or receive a premium, how much was it? €  ,  ,

### 8. Responsibility for fitting out the property:

Who was responsible for fitting out the property: ☐ Landlord ☐ Tenant ☐ Both

If the fit out occurred within the last 5 years, give the approximate cost and details: (Exclude Furniture & Fittings) €  ,  ,

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### 9. Please indicate how your rent is calculated:

- |                              |                          |                                      |                          |
|------------------------------|--------------------------|--------------------------------------|--------------------------|
| A. Open market rental value: | <input type="checkbox"/> | D. Indexation (eg. C.P.I.):          | <input type="checkbox"/> |
| B. A percentage of turnover: | <input type="checkbox"/> | E. Other/or any combination of above | <input type="checkbox"/> |
| C. A stepped rent agreement: | <input type="checkbox"/> | (Please give details below)          |                          |
- NB: A stepped rent is where the lease rent is subject to predetermined increases or decreases to the rent determined at the commencement of the lease.*

If you wish to provide any additional detail relative to how your rent is calculated please do so here:

### 10. Property Details:

- A. How many car spaces do you occupy? Open:  Covered:
- B. Please specify floor level of the building occupied. (eg Basement, Ground Floor, 1st floor, etc)
- 
- C. What is the approximate floor area occupied in total:  Square Meters
- D. Please give details of property use: (eg shop, restaurant, factory, warehouse, etc)
- 

### 11. If you want to give any additional information, please do so below:

### 12. I confirm to the best of my knowledge, the above information is correct:

Signature:  /  /

Name (Block Capitals)  (dd/mm/yyyy)

Position (eg Occupier, Company Director, etc)

Thank you for completing this form. Please return it in the envelope provided.

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