

July 25, 2024

RE:	Request for Property Sale Information Roll Number: Property Address: Property Group:
	City of Winnipeg Assessment and Taxation Department is collecting information for the purpose of preparing ext General Assessment in accordance with Section 9(1) of <i>The Municipal Assessment Act</i> .
	der to make property assessments reflective of market value, it is necessary for us to obtain details of recent erty sales and, for all income-producing properties, accurate operating income and expense information.
Augi	therefore, request that you complete the enclosed questionnaire(s) and return them to our office on or before ust 16, 2024. Failure to comply with this request will result in the imposition of penalties as outlined in <i>The icipal Assessment Act</i> and detailed in the attached Instructions for Completing Questionnaire(s).
	se note that the questionnaire(s) and document(s) included in this package are also available in French by acting us at 311 or toll-free 1-877-311-4974. Included in this package are:
	Instructions for Completing Questionnaire(s) and Legislative Authority
	Property Income and Expense Questionnaire; Form: 529-3
	Tenant Verification Form; Form: 529-4
	Multi-Family Questionnaire; Form: 529-5
	Property Sale Questionnaire; Form: 529-10
	are confident that your cooperation will result in an accurate and fair assessment. If you have any questions, see call our Contact Centre at 311 or toll-free 1-877-311-4974.
	Yours truly,
	Tim Austin City Assessor/Director

winnipeg.ca



le 25 juillet 2024

OBJET:	Demande de renseignements sur les ventes de biens fonciers N^o du rôle :				
	Adresse du bien :				
	Groupe de biens immobiliers :				

Le Service de l'évaluation et des taxes de la ville de Winnipeg collecte des renseignements en vue de la préparation de la prochaine évaluation générale en conformité avec le paragraphe 9(1) de la *Loi sur l'évaluation municipale*.

Pour que les évaluations foncières reflètent la valeur marchande, il est indispensable que nous obtenions des renseignements exacts sur les ventes récentes de biens fonciers ainsi que sur les revenus et les dépenses d'exploitation de tous les biens immobiliers productifs de revenus.

Par conséquent, nous vous demandons de bien vouloir remplir les questionnaires ci-joints et nous les retourner au plus tard le 16 août 2024. Le fait de ne pas obtempérer à la présente demande se traduira par l'imposition d'amendes ainsi qu'il est indiqué dans la *Loi sur l'évaluation foncière* et dans les instructions ci-jointes sur la manière de remplir les questionnaires.

Veuillez noter que les questionnaires et les documents inclus dans le présent envoi sont aussi disponibles en français. Pour les obtenir, composez le 311 ou gratuitement le 1-877-311-4974. Le présent envoi comprend notamment ce qui suit :

\boxtimes	Instructions sur la manière de remplir les questionnaires et dispositions législatives habilitantes
	$Questionnaire \ sur \ les \ revenus \ et \ les \ d{\acute e}penses \ d'exploitation \ de \ biens \ immobiliers - Formulaire \ n^o \ 529-3$
	Formulaire de vérification des locataires – Formulaire nº 529-4
\boxtimes	Questionnaire multifamilial – Formulaire nº 529-5
\boxtimes	Questionnaire sur les ventes de biens fonciers – Formulaire n° 529-10

Nous sommes persuadés que votre collaboration permettra d'assurer l'exactitude et la justesse des évaluations. Si vous avez des questions au sujet de ce qui précède, n'hésitez pas à communiquer avec notre Centre d'appels 311 ou gratuitement au 1-877-311-4974. Nous vous prions d'agréer, Madame, Monsieur, l'expression de nos sentiments les meilleurs.

Tim Austin L'évaluateur de la ville et directeur

F. | Fax: 204-986-6105 winnipeg.ca DS-SALEMQCOVER-MULTIFAM-529FR

T. | Tél.: 311



INSTRUCTIONS FOR COMPLETING QUESTIONNAIRE(S)

GENERAL INSTRUCTIONS

The forms contained in this package indicate a "DUE DATE".

The information requested is from the relevant Income and Expense statements.

PLEASE COMPLETE THE "CERTIFICATION" SECTION ON ALL APPLICABLE FORMS. IF WE REQUIRE CLARIFICATION OR ADDITIONAL INFORMATION, IT IS IMPORTANT FOR US TO HAVE A CONTACT PERSON IDENTIFIED.

PROPERTY INCOME AND EXPENSE QUESTIONNAIRE (FORM: 529-3)

Enter the information requested for the **relevant year**. If the property was purchased, include the income and expense information that was supplied by the vendor.

In the column, "Property Information", please complete the information required for Total Leasable Area, Average % of Space Vacant in **relevant year**, Number of Tenants (Non-Residential), Number of Indoor Parking Stalls (if applicable) and Number of Outdoor Parking Stalls (if applicable).

If the property is 100% owner occupied, then complete the information required for "Annual Expenses (Property)" and "Capital Cost Summary" only.

TENANT VERIFICATION FORM (FORM: 529-4)

This form must be completed for ALL non-residential space. Indicate which space, if any, is occupied by the Building Owner.

Enter the tenant information for the **relevant year**. If the property was purchased, include the tenant information that was supplied by the vendor. For units that were vacant for part of the year, record the information as follows:

Unit No.	Floor No.	Tenant Name	Primary Use	Lease Start	~~~~~
101	1	Vacant	11	N/A	~~~~~
102	1	The Clothing Store	6	2023/06/01	~~~~~

In the column "Primary Use", please indicate the predominant use of the premises or unit. For example, tenants are located in a shopping mall, and each individual unit may have a different use. A vacant unit would be listed as "Vacant - 11", while the Clothing Store (or unit) would be listed as "Retail - 6".

MULTI-FAMILY QUESTIONNAIRE (FORM: 529-5)

This form must be completed for all multi-family properties, i.e. apartment blocks, mixed-use properties and residences with more than two dwelling units.

If the property is mixed use, e.g. commercial on the main floor and apartments above, then this form must be completed along with the Tenant Verification Form, FORM: 529-4. The Tenant Verification Form should list all of the commercial tenants only.

In the "Property Features/Amenities" section, please specify features such as recreational rooms, meeting rooms, exercise rooms, and extra storage space (non-suite) for tenants.

PROPERTY SALE QUESTIONNAIRE (FORM: 529-10)

This form is to be completed for all properties that sold. The Sale Date shown is the date the Transfer of Land was registered at the Winnipeg Land Titles Office. The Sale Price shown is based on available information which may include the following: the consideration and sworn value registered at the Land Titles Office, media releases, company websites, advertisements/listings for sale, etc.

Please verify the information in Section A – "Property Identification" and note any discrepancies.

The Property Use Code is the most recent use of the property and may not be your intended use.

The Section C - "Property Characteristics" deals with any intended change in use of the property.

DS-SALEMQINSTR-529-2 (continued on back)

LEGISLATIVE AUTHORITY

Each form contains references to the following sections of *The Municipal Assessment Act:* This version is current as of January 23, 2024.

Assessor may request information

16(1) An assessor may request that a person, including a Crown agency or Crown corporation, who owns, uses or occupies assessable property, provide to the assessor information or documentation that relates or might relate to, or that affects or might affect, the value of the property being assessed or that is or might be relevant to assessment of the property which, without limiting the generality of the foregoing, may include information for each year since the previous general assessment respecting

- (a) any sale of the property
- (b) the cost of any construction on the property; and
- (c) any income or expense related to the use or operation of the property.

Time to provide information and declaration

16(2) Where a person, including a Crown agency or Crown corporation, receives a written request from an assessor under subsection (1), the person shall, within 21 days of receiving the request, provide information or documentation to the extent that information or documentation to which the request relates is in the possession or control of the person and shall provide, in the form of a signed statement, a declaration of the person affirming that the information or documentation provided by the person is complete, true and accurate.

Burden of proof for non-cooperation

53(3) Where an applicant fails or refuses

- (a) to give an assessor a reasonable opportunity to inspect the property; or
- (b) to comply with a request for information and documentation under section 16;

a board shall, at the hearing of the application, place the burden of proof on the applicant on all matters at issue.

Effect of providing inconsistent information

54(3.1) Where, in response to a request for information or documentation under clause 16(1)(c), a person provided information that was substantially at variance with information that he or she presented at a hearing, the presiding officer of the board or panel may order that the information presented by the person at the hearing is not to be considered by the board or panel in making its decision.

Effect of providing no information

54(3.2) Where a person failed to comply with a request for information or documentation under clause 16(1)(c), the board or panel shall specify in its order that any reduction in the assessed value of the person's property is not to take effect until the year following the year to which the application relates.

Burden of proof for non-cooperation

59(6) Where a property owner fails or refuses

- a) to give an assessor a reasonable opportunity to inspect the property; or
- b) to comply with a request for information and documentation under section 16;

the Municipal Board, on an appeal under subsection 56(2), shall, at the hearing of the appeal, place the burden of proof on the property owner on all matters at issue.

Effect of providing inconsistent information

60(2.1) Where, in response to a request for information or documentation under clause 16(1)(c), a person provided information or documentation that was substantially at variance with information that he or she presented at the hearing of an appeal by The Municipal Board, the person chairing the hearing may, whether or not an order was made under subsection 54(3.1) in respect of the matter, order that the information or documentation presented at the hearing is not to be considered by The Municipal Board in making its decision.

Effect of providing no information

60(2.2) Where a person failed to comply with a request for information or documentation under clause 16(1)(c), the Municipal Board shall specify in its order that any reduction in the assessed value of the person's property is not to take effect until the year following the year to which the application relates.

Offence and penalty

Where a person refuses or fails to supply information or documentation as required of the person under this Act or the regulations, the person commits an offence and is liable to a fine not exceeding \$25. for each day that the person continues to refuse or fail to supply the information or documentation.



MULTI-FAMILY QUESTIONNAIRE FORM: 529-5

12 MONTHS ENDING

DUE DATE: August 16, 2024

PROPERTY IDENTIFICATION							
Roll Number:							
	Property Use Code:						
Property Owner:		·					
Property Address:							
		PROP	ERTY FEAT	URES/AMEN	NITIES		
Please verify and/or che	ck off the features/ar	menities th	nat this proper	rty has?			
Miscellaneous	Heating	Air Con	ditioning	On-Site Lau	ındry	Other Feature	es/Amenities (specify)
☐ Resident Caretaker	☐ Electric Baseboard	☐ Centra	I A/C	☐ Washers - 0	Count:		
☐ Indoor Pool	☐ Electric Forced Air	☐ Wall A	/C	☐ Dryers - Co	ount:		
☐ Outdoor Pool	☐ Gas Forced Air						
☐ Sauna	☐ Hot Water	In-Suite	Appliances	Parking			
☐ Fireplace	☐ Steam	☐ Fridge	& Stove	☐ Indoor - Co	unt:		
☐ Balcony/Sundeck		☐ Dishw	asher	Outdoor - C	Count:	_	
☐ Elevator(s) - Count:		☐ Wash	er & Dryer				
Diameter (for an House)			SERV				
Please verify and/or che	ck off the services th	nat are inc	luded in the re	ent?			
☐ Heat	☐ Appliances	☐ Parking					
☐ Hydro	☐ Cable/Satellite TV	☐ Security	1				
☐ Water	☐ Laundry	Other (s	specify):				
If Parking is NOT include	ed in the rent, please	indicate t	he monthly re	ent charged fo	r:		
Outdoor Parking Stalls: \$_			oor Parking Sta				
						_	
Enter the following income	me information for th		SUITE RENT			ed in the relevan	t year, attach the income
and expense information	that was supplied b	y the ven	dor.		шо ранонио		. ,
TYPE OF SUITE	NUMBER OF S	UITES	MONTHL	Y RENT	ANNU	AL INCOME	
Bachelor							
1 Bedroom							
2 Bedroom 3 Bedroom							
Other (specify)							
(1 7 7	NTIAL SUITE INCOM	IE AT 100°	% OCCUPANO	:Y			
					l		
This information is collected und penalties as outlined in Sections							
Questionnaires" for the relevant	sections of The Municipal	Assessment	Act that apply. Th	e Assessment and	d Taxation Dep		from the unauthorized disclosure
of this and other information under the provisions of Manitoba's Freedom of Information and Protection of Privacy Act.							
CERTIFICATION							
I hereby certify that all information contained in this statement is true and correct. I understand that the willful making of any false statement of material fact herein will subject							
me and the property described to the penalties outlined in <i>The Municipal Assessment Act</i> .							
Name of Contact (please print)		Title				Signature	
, , , , , , , , , , , , , , , , , , , ,		- -				- 3	
Business Telephone		E-Mail Ad	dress			Date	



PROPERTY SALE QUESTIONNAIRE FORM: 529-10

A. PROPERTY IDENTIFICATION						
Roll Number: Property Group: Property Owner: Property Address: C.T. Number:	Neighbourhood Characterization Area: Sale Date: Vendor:					
Property Use Code:						
Troporty ode oode.	Sale Price:					
	Cale i lice.					
	B. SALES VERIFICATION					
1. Is the sale price, shown above, the actual		☐ YES	□NO			
If NO, enter the correct a		\$				
2. On what date was the sale price agreed u						
3. Was this sale an arm's-length, open mark If NO, was the sale	et transaction?	☐ YES	□NO			
	elated parties?	☐ YES	□NO			
Court - ord		YES	□NO			
Subject to	unusual conditions? (please specify)	☐ YES	□NO			
			Пыо			
4. Were any items other than real estate inc		☐ YES	□NO			
	f the included items below: or Equipment	\$				
Business A	• •	\$				
Furniture		\$				
Other (plea	se specify)					
		_\$				
	pinion of value completed on the property at the time of sale?	☐ YES	□NO			
If YES, please indicate the	ne value: e appraisal report or opinion of value.	\$				
6. Is there a leaseback arrangement between		☐ YES	□NO			
If YES, please provide the		0				
· · · · ·		_				
7. Is this sale full interest?		☐ YES	□NO			
If NO, please provide de	tails of other interests:					
8. Is there a single lease covering any or all	of the buildings?	YES	□NO			
9. Is there a land lease involved?	or the buildings:	YES	□NO			
If YES, please provide d	etails below:					
· · · · · ·						
10. Did the Purchaser occupy all or part of t		☐ YES	□NO			
11. Does the Purchaser intend to occupy all		YES	□ NO			
12. Does the Purchaser intend to use the pr	operty for a new business?	☐ YES	□NO			
	C. PROPERTY CHARACTERISTICS					
13. What was the property used for at the time	of sale?					
(e.g. vacant land, retail, office, war	rehouse, manufacturing, storage, apartment)					
14. Is the intended use of the property the s		☐ YES	□ NO			
If NO, indicate the intend						
15. What was the overall condition of the but (Choose one of the following: Fair			_			
16. Did you, or do you intend to, make majo		☐ YES	□NO			
	type and estimated (or actual) cost.					
	7,77 ()	\$				
17. Did you, or do you intend to, demolish a		☐ YES	□NO			
If YES, indicate the date	structure and demolition cost.	\$				
40. Do you intend to sub-district office of	of the property of					
18. Do you intend to subdivide all or a part of		☐ YES	□NO			
If YES, please provide d	cialis delow.					

DS-SALEMQFORM-529-10 (continued on back)

D. PROPERTY FINANCIAL DETAILS Please complete the financial details with respect to the purchase of the property.							
riedse complete the imanoidi details	Dollar Amount/Value	% of Total	Interest Rate	l ender	's Name and	Address	
19. Cash Down	\$	70 01 10141	morost rate	2011401	o Hamo and 2	1441.000	
20. Assumed Financing	\$						
21. Vendor Take-Back Mortgage	\$						
22. First Mortgage	\$						
23. Second Mortgage	\$						
24. Property in Exchange	\$						
25. Securities Transferred	\$						
26. Liens, Legacies, Annuities and	\$						
Maintenance Charges to which the Transfer of Land is subject to	\$						
27. Other Valuable Consideration	\$						
28. Goodwill	\$						
29. Chattels (items of tangible Personal Property)	\$						
30. Other Consideration not included above	\$						
TOTAL	\$	100.0%					
	E. INCOME ANI	D EXPENSE	INFORMATION				
31. Was part or all of this property tena	ant-occupied at the time o	f sale?			☐ YES	□NO	
32. Was the purchase price based on t	the property's net operation	ng income?			☐ YES	□NO	
If YES, what is the Capitalization R	ate at which you assume	d you purchase	d the property			%	
33. Were there any financial details and	d/or investment prospecti	us available pric	or to the conclusion	of the sale?	☐ YES	□NO	
33. Were there any financial details and/or investment prospectus available prior to the conclusion of the sale? YES NO If YES, please return a copy of the above documents with this form.							
This information is collected under the authority of <i>The Municipal Assessment Act</i> - Sections 16(1), 16(2). Failure to comply with this request may result in the imposition of penalties as outlined in Sections 53(3), 54(3.1), 54(3.2), 59(6), 60(2.1) 60(2.2) and 64 of <i>The Municipal Assessment Act</i> . Refer to page 2 of "Instructions for Completing Questionnaires" for the relevant sections of <i>The Municipal Assessment Act</i> that apply. The Assessment and Taxation Department is prevented from the unauthorized disclosure of this and other information under the provisions of Manitoba's <i>Freedom of Information and Protection of Privacy Act</i> .							
CERTIFICATION							
I hereby certify that all information contained in			· ·	of any false stateme	nt of material fact	herein will	
subject me and the property described to the penalties outlined in <i>The Municipal Assessment Act</i> .							
Name of Contact (please print) Position Signature							
Pusings Talankana	E Mail Addings		<u></u>	into			
Business Telephone	E-Mail Address		D	ate			