

February 13, 2025

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.
Marc	therefore, request that you complete the enclosed questionnaire(s) and return them to our office on or before ch 7, 2025. 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:
⊠ I	Instructions for Completing Questionnaire(s) and Legislative Authority
□ I	Property Income and Expense Questionnaire; Form: 529-3
	Tenant Verification Form; Form: 529-4
	Multi-Family Questionnaire; Form: 529-5
⊠ I	Property Sale Questionnaire; Form: 529-10
	are confident that your cooperation will result in an accurate and fair assessment. If you have any questions, the call our Contact Centre at 311 or toll-free 1-877-311-4974.
	Yours truly,
	Tim Austin City Assessor/Director



le 13 février 2025

OBJET:	Demande de renseignements sur les ventes de biens fonciers
	Nº du rôle :
	Adresse du bien :
	Groupe de hiens 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 7 mars 2025. 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	2024/06/01	~~~~~

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 24, 2025.

# 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: March 7, 2025

PROPERTY IDENTIFICATION										
Roll Number: Property Group:										
Property Owner			Property Use Code:							
Troperty Owner.	Property Owner: Property Ose Code.  Property Address:									
	Floperty Address.									
		PROP	ERTY FEAT	JRES/AMEN	NITIES					
Please verify and/or ched	ck off the features/an	nenities tl	nat this proper	ty has?						
Miscellaneous	Heating	Air Con	ditioning	On-Site Lau	ındry	Other Feature	es/Amenities (specify)			
☐ Resident Caretaker	☐ Electric Baseboard	☐ Centra	al A/C	☐ Washers - 0	Count:					
☐ Indoor Pool	☐ Electric Forced Air	☐ Wall A	/C	☐ Dryers - Co	unt:					
☐ 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	ount:					
☐ Elevator(s) - Count:		☐ Wash	er & Dryer							
			275							
Please verify and/or ched	ck off the services th	at are inc	SERV							
_		_								
☐ Heat	☐ Appliances	☐ Parking	•							
☐ Hydro	☐ Cable/Satellite TV	☐ Security	у							
☐ Water	☐ Laundry	Other (	specify):							
If Parking is NOT include	ed in the rent, please	indicate t	he monthly re	nt charged fo	r:					
Outdoor Parking Stalls: \$_	-		oor Parking Sta							
				Ψ						
			SUITE RENT							
Enter the following incor and expense information				ne property w	as purcnase	d in the relevan	t year, attach the income			
TYPE OF SUITE	NUMBER OF SI		MONTHL	Y RFNT	ANNUA	L INCOME				
Bachelor		0			7					
1 Bedroom										
2 Bedroom										
3 Bedroom										
Other (specify)										
GROSS POTENTIAL SUITE INCOME AT 100% OCCUPANCY										
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 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> .										
N (0 : : : : : : : : : : : : : : : : : :						0'				
Name of Contact (please print)		Title				Signature				
Business Telephone		E-Mail Ad	dress			Date				



# PROPERTY SALE QUESTIONNAIRE FORM: 529-10

A. PROPERTITIOEN	TIFICATION		
Roll Number:	Neighbourhood		
Property Group:	Characterization Area:		
Property Owner:	Sale Date:		
Property Address:	Vendor:		
C.T. Number:	70		
Property Use Code:			
	Sale Price:		
	Sale File.		
B. SALES VERIF	ICATION		
1. Is the sale price, shown above, the actual price paid?		YES	□NO
If NO, enter the correct amount		\$	
2. On what date was the sale price agreed upon?		Ψ	
3. Was this sale an arm's-length, open market transaction?	•	YES	□NO
If NO, was the sale		0	
Between related parties?		☐ YES	□NO
Court - ordered?		YES	□NO
Subject to unusual conditions? (please specify	d)	☐ YES	□NO
Casjoot to an acad container (process speed)	,		
4. Were any items other than real estate included in the purchase price?		☐ YES	□ NO
If YES, enter the value of the included items below:			
Machinery or Equipment		\$	
Business Accounts		\$	
Furniture		\$	
Other (please specify)			
		<u>\$</u>	_ <u>_</u>
5. Was a market value appraisal report or opinion of value completed on the		☐ YES	□NO
If YES, please indicate the value:		\$	
Please send a copy of the appraisal report or opinion of v			
6. Is there a leaseback arrangement between Vendor and Purchaser?		☐ YES	□NO
If YES, please provide the details below:			
7. Is this sale full interest?		YES	□NO
		☐ 1E3	
If NO, please provide details 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?		☐ YES	□NO
If YES, please provide details below:		0	
<u></u>			
10. Did the Purchaser occupy all or part of the property prior to purchase?		YES	□NO
11. Does the Purchaser intend to occupy all or part of the property after the s		☐ YES	□NO
12. Does the Purchaser intend to use the property for a new business?		YES	□NO
C. PROPERTY CHARA	ACTEDISTICS		
	4CTERISTICS		
13. What was the property used for at the time of sale?			
(e.g. vacant land, retail, office, warehouse, manufacturing, storage,			
14. Is the intended use of the property the same?		☐ YES	□NO
If NO, indicate the intended use of the property.			
15. What was the overall condition of the building(s) on the site at the time of	purcnase?		
(Choose one of the following: Fair, Average, Good, Very Good)			
16. Did you, or do you intend to, make major repairs or improvements to the		☐ YES	□NO
If YES, indicate the date, type and estimated (or actual) of		¢	
17. Did you, or do you intend to, demolish any of the structures on the prope		\$ □ YES	□NO
If YES, indicate the date, structure and demolition cost.	rty:	, S \$	
ii 120, indicate the date, structure and demolition cost.		Ψ	
18. Do you intend to subdivide all or a part of the property?		☐ YES	□NO
If YES, please provide details below:			<u> </u>
= 5, produce provide detaile bolow.			

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

D. PROPERTY FINANCIAL DETAILS							
Please complete the financial details with respect to the purchase of the property.							
	Dollar Amount/Value	% of Total	Interest Rate	Lender'	's Name and	Address	
19. Cash Down	\$						
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	na income?			☐ YES	□NO	
	32. Was the purchase price based on the property's net operating income?  If YES, what is the Capitalization Rate at which you assumed you purchased the property  ———————————————————————————————————						
ii 120, what is the Capitalization iv	ate at willon you assume	a you parchase	a the property				
33. Were there any financial details an	d/or investment prospecto	us available pric	or to the conclusion	of the sale?	☐ YES	□ NO	
If YES, please return a copy of the	above documents with th	is 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	this statement is true and corr	ect. I understand th	nat the willful making o	f any false stateme	nt of material fac	t herein will	
subject me and the property described to the penalties outlined in The Municipal Assessment Act.							
Name of Contact (please print)  Position  Signature							
Traine or Contact (prease print) 1 Ostron Signature							
Business Telephone	E-Mail Address			ate			
•							