

# Valuation Report

S.H.I.P., Grand Canal House, 1 Upper Grand Canal Street, Dublin 4. Locall: 1890 60 70 80  
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# S.H.I.P.

<b>1. Applicant(s)</b>											
Property Address											
<b>2. Description of property</b>	House	<input type="radio"/>	Bungalow	<input type="radio"/>	Apartment	<input type="radio"/>	Duplex	<input type="radio"/>	Detached	<input type="radio"/>	
Semi-D	<input type="radio"/>	Terraced	<input type="radio"/>	Purpose built	<input type="radio"/>	Converted	<input type="radio"/>	Multi unit	<input type="radio"/>		
<b>Photo Attached</b>	Yes	<input type="radio"/>	No	<input type="radio"/>	If no please supply reason			No. of floors			
Living room	Bedrooms		Bathrooms		Kitchens		Toilets				
Current area (sq mts) of main building				Proposed area after extension (if applicable)							
Site Area	Garage		Outbuildings type								
Location, access and distance from road / nearest town											
<b>3. Type of construction and finish (walls, floors, roofs, windows etc.)</b>					Year property built						
Main structure	Good	<input type="radio"/>	Fair	<input type="radio"/>	Poor	<input type="radio"/>					
Internal décor	Good	<input type="radio"/>	Fair	<input type="radio"/>	Poor	<input type="radio"/>					
<b>Services</b>	Gas	<input type="radio"/>	Electricity	<input type="radio"/>	Main water	<input type="radio"/>	Main drainage	<input type="radio"/>	Septic tank	<input type="radio"/>	
Central heating	<input type="radio"/>		Roads & Services adopted	Yes	<input type="radio"/>	No	<input type="radio"/>	if no est cost € <input type="radio"/>			
<b>Location</b>	Improving	<input type="radio"/>	Stationary	<input type="radio"/>	Deteriorating	<input type="radio"/>	<b>Comment</b>				
<b>Saleability</b>	Good	<input type="radio"/>	Fair	<input type="radio"/>	Poor	<input type="radio"/>					
<b>Subsidence, flooding &amp; dampness</b> - Has the property or surrounding area been affected by subsidence, heave, settlement, landslip or flooding?											
Yes	<input type="radio"/>	No	<input type="radio"/>	if yes please give details							
Is the property affected by dampness, woodwork or dry rot?	Yes	<input type="radio"/>	No	<input type="radio"/>	If yes please give details						
<b>Matters to be drawn to the attention of the client's solicitor</b>											
Rights of way / easements	<input type="radio"/>				Drains sewers liability	<input type="radio"/>	Road agreements	<input type="radio"/>			
Other please specify	<input type="radio"/>				Planning permissions bye law approvals	<input type="radio"/>					
<b>4. General remarks</b> - comment on any aspect affecting the present or future valuation of the property (e.g. town planning proposals, existing tenancies, mews on site, multiunited prop etc.) and the facilities in the area											
<b>Essential Repairs</b> - Comment on the condition of the property and of any extensions, developments and an estimate of any necessary repairs, modifications. The expression "NEW" will not suffice.											
Estimated property open market value on completion of repairs											
Do you recommend arranging a specialist survey report on any defects noted					Yes	<input type="radio"/>	No	<input type="radio"/>	Specific type		
<b>5. Valuation</b> (plus site plan if site is of uneven dimensions)			Site Value €								
Property in present condition					Recommended insurance cover (total reinstatement cost)						
Value includes car space for apartment	Yes	<input type="radio"/>	No	<input type="radio"/>							
Is property suitable letting	Yes	<input type="radio"/>	No	<input type="radio"/>	Monthly rent attainable						
Letting demand	Good	<input type="radio"/>	Fair	<input type="radio"/>	Poor	<input type="radio"/>					
Letting Supply	Over supplied	<input type="radio"/>	Under supplied	<input type="radio"/>							
Declaration: I certify that the property described in this report has been inspected by me, on the date of inspection specified below and that I have valued the property and prepared this report and that neither I or my employers have a conflict of interest of this property. <b>This firm holds adequate indemnity insurance.</b>											
Company name											
Address						Tel No.					
Signature of valuer			Name of valuer			Date					
FRICS, ARICS, FSVA, ASVA, FIAVI, MIAVI						Date of inspection					