



E.D. File No. ....

## ESTATE DUTY ORDINANCE

This questionnaire about the deceased's property must be completed in duplicate by the person who is dealing with the deceased's estate.

Estate of ..... deceased who died on .....

Address of the property [per Land Registry record] .....

Lot No. ....

Share of Lot .....

QUESTION	ANSWER
<p>1. (a) What parts of the property were neither sub-leased nor let at the date of death?</p> <p>(b) What parts of the property were let or leased at the date of death?</p> <p>In respect of each part let or leased:—</p> <p>(i) When did the lease commence?</p> <p>(ii) What was the length of the lease?</p> <p>(iii) What rent was the tenant required to pay?</p> <p>(iv) From which date did this rent commence?</p> <p>(v) What other charges was the tenant required to pay to the landlord, e.g. for gas, electricity, water, air-conditioning, lift services, cleaning services etc.?</p> <p>(vi) Who was responsible for paying rates: landlord or tenant?</p>	
<p>2. State the use of the property (i.e. domestic, storage, shop, factory, etc.)</p>	
<p>3. (a) What is the term of the Government lease of the property?</p> <p>(b) What is the amount of the annual Government Rent?</p> <p>(c) If the Government lease has been regranted:—</p> <p>(i) On what date was the regrant agreement signed?</p> <p>(ii) What was the amount of the regrant premium payable?</p>	
<p>4. What amounts were owing to the deceased at the date of death:—</p> <p>(a) Accrued but unpaid?</p> <p>(b) Apportioned to that date?</p>	

QUESTION	ANSWER
5. (a) On what date was the property acquired by the deceased?  (b) What was the amount of consideration of the transaction?	
6. What are the names of the registered owners of the property and their respective shares therein?	

In respect of property in rural areas in New Territories [i.e. property which is described as Lot No. XXXX in D.D. XXXX ], please answer the following questions and supply a copy of the location plan/floor plan.

1. Whether the property is a bare site?  
 Yes (No need to complete 2 below)                       No (Please complete 2 below)
  
2. Please complete the following if any building or structure has been erected on the site.
  - a. The building or structure was completed in:—
 

<input type="checkbox"/> 1950 or before	<input type="checkbox"/> 1981–1990
<input type="checkbox"/> 1951–1960	<input type="checkbox"/> 1991–present
<input type="checkbox"/> 1961–1970	<input type="checkbox"/> under construction
<input type="checkbox"/> 1971–1980	<input type="checkbox"/> _____ [the exact year if known]
  
  - b. The building or structure was:—
 

<input type="checkbox"/> one-storeyed	<input type="checkbox"/> 3-storeyed
<input type="checkbox"/> 2-storeyed	<input type="checkbox"/> _____ storeyed [please specify]
  
  - c. Approximate floor area:—
 

G/F _____ *sq.ft./M <sup>2</sup>	Other floor [please specify]
1/F _____ *sq.ft./M <sup>2</sup>	/F _____ *sq.ft./M <sup>2</sup>
2/F _____ *sq.ft./M <sup>2</sup>	/F _____ *sq.ft./M <sup>2</sup>

\*Delete whichever is not applicable.

Signature of person who completed this form \_\_\_\_\_

Name in BLOCK LETTERS \_\_\_\_\_

Address \_\_\_\_\_

Telephone No. (during day time) \_\_\_\_\_ Date \_\_\_\_\_