

**SUPPLEMENTARY INFORMATION**  
**Commercial lodging**

<b>PROPERTY</b>	Owner :
Account no. :	Address :
Matricule :	Municipality:

**Hotel Establishment :** \_\_\_\_\_

1. According to the classification certificate of a tourist accomodation establishment issued by the "Ministère du Tourisme"  
 a) How many rooms have you declared : \_\_\_\_\_ rooms.  
 b) What is the latest rating of your establishment ? \_\_\_\_\_ stars.

2. Does a family member or yourself occupy on a regular base (without other apartment elsewhere) your commercial lodging facilities ?  Yes  No

-In the affirmative, what is the estimated rental value of the space used for personal purposes (apartment) ?  
 example : \$ 400 / month \_\_\_\_\_

-Are the rooms occupied by yourself or a family member for personal purposes, included in the number of rooms declared on the classification certificate issued by the "Ministère du Tourisme" ?  
 Yes  No

3. Can you identify three (3) of your main competitors in commercial lodging :  
 1 \_\_\_\_\_  
 2 \_\_\_\_\_  
 3 \_\_\_\_\_

4. For the years listed below, please state :

Your occupancy ratio (Number of room nights sold / Number of room nights available)

Your average room rate (Room sales / Number room nights sold)

Year	Room nights sold (1)	Room nights available (# rms. X 365 days) (2)	Occupancy ratios (1) / (2)	Average room / rate (\$)
<b>2017</b>	_____	_____	_____ %	\$ _____
<b>2018</b>	_____	_____	_____ %	\$ _____
<b>2019</b> <input type="checkbox"/> If budgeted	_____	_____	_____ %	\$ _____
<b>2020</b> Budgeted	_____	_____	_____ %	\$ _____

5. What services are included in your room rates ?  Breakfast  Local calls  Internet  
 Others ? (specify) \_\_\_\_\_

6. Besides hotel, are there any businesses running in the building (restaurant, convenience store, others) ?  
 Yes  No

In the affirmative, please complete the **LL01** form enclosed.

7. Is there anything you wish to mention that can provide additional information to the assessor in regard with your property value ?

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

<b>I HEREBY DECLARE THAT THE INFORMATION PROVIDED HEREIN IS ACCURATE</b>		
Representative's name : (in block letters)	Signature :	Date :
Title :	Company :	
email address :	Telephone :	