Government of the Macao Special Administrative Region

Property Tax

Application for Special Evaluation

M/6

Financial Services Bureau Please read the			d the ins	tructions on t	he back of t	his form o	carefully before filling it in.
1	Street: No.:	the street, which the f d.			Macao Taipa Coloane	Property Registration Number:	
	Building:		_				
3	Name(s) of owner(s):			Please indicate the property registration numb the flat which is being valued. Taxpayers may to the property tax demand for the registra-			refer Applicant
	Please indicate the name(s) of the owner(s). Taxpayers may indicate one of the owners if there is more			number or visit Service Centre 1, the Macao Government Services Centre in Islands, or the Macao Government Services Centre for further information. Taxpayer Government			
	signs this form as the one inc	vever, the person when should be the same dicated in this section	ne e		place a "√" or ")	X" to indicate	department
5	Identification of Witne	ess:		your ch	oice.		sion
		indicate the name, name, name, name, or an oresents the owner.	witness	_			
	No.:	P.O. B	Box:				
	Floor:	Flat:					
	Building:					12 Impl	lementation date
	Масао	Taipa	Coloan	e Telephon	e:		
6	Description of the flat	(s):					
Flo	oor Flat	Area U	Jse Type	Evaluate	d amount	11 For	Evaluation Committee use only
							New valuation
	Floor, flat, a industrial or bedroom, T2 and three be living room a indicate the t	etailed information for rea (usable area of commercial), type - living room and two drooms, T4 - living of Ind five bedrooms of otal annual rent obtained the	of the flat (T1 - livi wo bedroon room and f or more) an ained. For), use (residentiang room and or ns, T3 - living roo our bedrooms, T5 d valuation. Pleas non-rental propert	al, ne m is-		
	, , , ,						
Reason for the application / Remarks Please indicate the reason for this application. (If there is not enough space, please continue on separate A4 sheets of paper)			8	All the information declared is true and correct, and no requested information has been omitted. The signature must be signed by the owner indicated in section 3. Please indicate the date request is submitted.			9 Verified by the department
-			-	Cianatura			
			-	Signature			
			_				Signature
			- - 	Date/_	/	_	Date//