

Real Estate Transaction Declaration Form (Tenancy)

Declaration Serial Number : (Official Use Only)

1. Declarant (Real estate brokerage)	Name				ID No.		Signature/Seal
	Mailing address				Telephone		
						E-mail	
2. Declaration Agent Entrusted by the declarant	Name				ID No.		Signature/Seal
	Mailing address				Telephone		
						E-mail	
3. Lessee	Name				ID No.		
	Mailing address				Telephone		
						E-mail	
4. Building Address							
5. Leased Building Number	Land ___ Buildings ___ Rooms						
6. Total Floors of the Building		8. Leasing Floor		10. Current Compartment of the Leased Building	___ rooms ___ halls ___ bathrooms <input type="checkbox"/> no compartment		
7. Building Type		9. Accessory Facility	Yes <input type="checkbox"/> No <input type="checkbox"/>	11. Lease Term	___ Year(s) ___ month(s)		
12. Total rent for land and building (including parking space)		NTD _____ per month		15. Lease Date	_____ (YYYYMMDD)		
13. Total lease amount for parking space		NTD _____ per month		16. Management Organization	Yes <input type="checkbox"/> No <input type="checkbox"/>		
14. Parking Space Information	Number of parking space: <input type="checkbox"/> Parking space is included in the rent <input type="checkbox"/> No parking space leasing			17. Remarks			

Declaration Serial Number : (Official Use Only)

List of the Leased Object					
18. Land					
County/City	District	Section/Subsection	Land Serial Number	Leasing Area (m ²)	Land Use Zoning
					<input type="checkbox"/> Resident <input type="checkbox"/> Commercial <input type="checkbox"/> Industry <input type="checkbox"/> Farm <input type="checkbox"/> Others
					<input type="checkbox"/> Resident <input type="checkbox"/> Commercial <input type="checkbox"/> Industry <input type="checkbox"/> Farm <input type="checkbox"/> Others
					<input type="checkbox"/> Resident <input type="checkbox"/> Commercial <input type="checkbox"/> Industry <input type="checkbox"/> Farm <input type="checkbox"/> Others
					<input type="checkbox"/> Resident <input type="checkbox"/> Commercial <input type="checkbox"/> Industry <input type="checkbox"/> Farm <input type="checkbox"/> Others
					<input type="checkbox"/> Resident <input type="checkbox"/> Commercial <input type="checkbox"/> Industry <input type="checkbox"/> Farm <input type="checkbox"/> Others
19. Building					
County/City	District	Section/Subsection	Building Permit Number	Leasing Area (m ²)	
20. Parking Space					
No.	Type of Parking Space		Leasing Amount (NTD/month)	Leasing Area (m ²)	Floor of Parking Space