Kāinga Ora Homes and Communities

	1.4				
Private Owner Name	Peter	محارض	<u></u>		
Email Address ynda-peter-wil	sonishot	mail.on	Contact Number	0221724125	
Property Address for lease including Suburb, City,		PROPERTY DET		and the second second second second	
Postcode	MD M	raring	erst Izau	vene 0473	
Property Floor Area (m2)	(mz) 79.15	Build Year	1989	Total Area of Kitchen/Dining/Living room (m2)	
Current status of property	Va	cant	Tenanted (date tenant will vacote)	Other	
		PROPERTY FEAT	URES		
Number of single and double bedrooms	251	cibi	Number of Bathrooms & Toilets	2	
Do the facilities run on Gas or Electric	Both	n	Study or Sunroom		
Laundry facility (Yes or No)	Yes	>	Type of Clothesline, i.e.; rotary, T-bar, none		
Does the property come with a stove (Yes or No)	Yes	- new	Does it come with other appliances, if so list them here	5	
Type of Heating, <i>i.e.</i> ; <i>Heater, heat pump, fireplace, log burner etc.</i>			Curtains (Yes or No)	les	
Ventilation, i.e.; Range hood in kitchen or Extractor fans in bathroom, state where if yes	Panget	sitians	Type of flooring, <i>i.e.;</i> carpet, floorboards	carpet winyl plank.	
Insulation details; write down where its located and R-values and when it was last inspected					
	Charles State (1) and the state of the state	RNAL PROPERTY	the CANANANAN AND AND AND AND AND AND AND AND		
Type of Property, i.e.; Standalone, units, apartment complex, duplex	stind	itone	Single or Multi Storey:	2 storey	
Single, Shared Driveway, Common Area, or Jointly Owned Access Lot	Sinc	Ne	Contour of Section, <i>i.e.; flat, sloping</i>	flort stoping	
Exterior Cladding, i.e.; brick, cladding etc.	shada	w clac	1 ~ Cibre Pla	ank	
Is the garage internal or external	interne	al	Parking facilities	Single gereiting	
Is there a sleep out, shed or additional structure apart from the house	NO		Are there other external facilities, <i>i.e.; pool, spa</i>	20	
Is there fencing around the property, please give details	ん	CC	142		
		LEGAL DETAIL	Sector and the sector of the s		
Cross-lease or Freehold	Fileho	bld	Body Corporate (Yes or No)	20	
Does your property meets Healthy Homes		OTHER			
standards? If so, please provide us the Healthy Homes Certificate	NO		N.		
Does your property have any Land Covenants or is part of any Incorporated Society that Käinga Ora or its sub-lessee will have to adhere to?	NO				
Will you be willing to bring the property to Kāinga Ora's lettable standard if required	les				
Does this property have any past/current issues of drugs or illegal activity and will you be willing to have the property tested prior to leasing	NO ~ Yes				
Please specify any modifications or accessible features made since property build, if any	self contained worth lm D/S				
Has the property been a leaky building (Yes or No)	NO				
Has asbestos been identified in your property and if yes, please specify	20				
Does your property comply with the new Healthy Homes Standards? (Yes or No)	NO				
Any additional information that may not have been mentioned above	FLILL PC	novat	Bathroom.	aundry	
External and Internal photos included (Yes or No) (If No, then state why)	Les		Floor Plan included (Yes or (If No, then state why)	No)	

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Private Owner Name	Peter wild			
Email Address Unda pter_wilson	. Dhotmail. wm	Contact Number	022 1724125	
Property Address for lease including Suburb, City,	PROPERTY DET			
Postcode	99 marris	ner st Ra	wene	
Property Floor Area (m2)	79. (m2) Build Year	1989	Total Area of Kitchen/Dining/Living room (m2)	
Current status of property	Vacant	Tenanted (date tenant will vacate)	Other	
	PROPERTY FEAT	THIDES		
Number of single and double bedrooms	25 106	Number of Bathrooms & Toilets	2	
Do the facilities run on Gas or Electric	Both	Study or Sunroom		
aundry facility (Yes or No)	Yes	Type of Clothesline , <i>i.e.;</i> rotary, T-bar, none		
Does the property come with a stove (Yes or No)	Yes	Does it come with other appliances, if so list them here	•	
Type of Heating, i.e.; Heater, heat pump, fireplace, log burner etc.		Curtains (Yes or No)	Yes	
Ventilation, i.e.; Range hood in kitchen or Extractor fans in bathroom, state where if yes	Rangehouch a extracted fens	Type of flooring , <i>i.e.</i> ; carpet, floorboards	carpetavinyplan	
Insulation details; write down where its located and R2.2 Walls all new R-values and when it was last inspected existing insulation in Ceiling instaction				
	EXTERNAL PROPERTY			
ype of Property, i.e.; Standalone, units, apartment omplex, duplex	standalone	Single or Multi Storey:	multi storey	
ingle, Shared Driveway, Common Area, or Jointly Iwned Access Lot	Single	Contour of Section, <i>i.e.;</i> <i>flat, sloping</i>	flat sloping	
xterior Cladding, i.e.; brick, cladding etc.	Shadow di	ad - fibre f	Mank	
the garage internal or external	Internal	Parking facilities	one car garage 2	
s there a sleep out, shed or additional structure part from the house	NO	Are there other external facilities, <i>i.e.</i> ; pool, spa	NO . J	
s there fencing around the property, please give letails	NO			
LEGAL DETAILS				
ross-lease or Freehold	Fleehold	Body Corporate (Yes or No)	NO	
oes your property meets Healthy Homes tandards? If so, please provide us the Healthy	OTHER			
lomes Certificate Does your property have any Land Covenants or is part of any Incorporated Society that Käinga Ora or its sub-lessee will have to adhere to?	No			
Will you be willing to bring the property to Kāinga Ora's lettable standard if required	Yes			
Does this property have any past/current issues of drugs or illegal activity and will you be willing to have the property tested prior to leasing	No « Yes			
Please specify any modifications or accessible features made since property build, if any	self contained ava & room DIS			
as the property been a leaky building (Yes or No)	No			
las asbestos been identified in your property and if yes, please specify	NO			
Does your property comply with the new Healthy Homes Standards? (Yes or No)	04	ji ji		
ny additional information that may not have been mentioned above	Fullyrenoud	ted news kita	Ler Broom alaundry	
External and Internal photos included (Yes or No) (If No, then state why)	Yes	Floor Plan included (Yes or (If No, then state why)	11 1	



Private Owner Name			
Email Address		Contact Number	
Property Address for lease including Suburb, City,	PROPERTY DE	FAILS	
Postcode	1		Total Area of
Property Floor Area (m2)	Build Year	2	Kitchen/Dining/Living room (m2)
Current status of property	Vacant	Tenanted (date tenant will vacate)	Other
	PROPERTY FEAT	FURES	•
Number of single and double bedrooms		Number of Bathrooms & Toilets	
Do the facilities run on Gas or Electric		Study or Sunroom	
Laundry facility (Yes or No)		Type of Clothesline , <i>i.e.;</i> rotary, T-bar, none	
Does the property come with a stove (Yes or No)		Does it come with other appliances, if so list them here	
Type of Heating, i.e.; Heater, heat pump, fireplace, log burner etc.		Curtains (Yes or No)	
Ventilation, i.e.; Range hood in kitchen or Extractor fans in bathroom, state where if yes		Type of flooring, <i>i.e.,</i> carpet, floorboards	
Insulation details; write down where its located and R-values and when it was last inspected			
	EXTERNAL PROPERTY	FEATURES	
Type of Property, i.e.; Standalone, units, apartment complex, duplex		Single or Multi Storey:	
Single, Shared Driveway, Common Area, or Jointly Owned Access Lot		Contour of Section, i.e.; flat, sloping	
Exterior Cladding, i.e.; brick, cladding etc.			
s the garage internal or external		Parking facilities	8
s there a sleep out, shed or additional structure apart from the house		Are there other external facilities, i.e.; pool, spa	
s there fencing around the property, please give details		8	
	LEGAL DETAI		
Cross-lease or Freehold		Body Corporate (Yes or No)	
Does your property meets Healthy Homes	OTHER		
standards? If so, please provide us the Healthy Homes Certificate			
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Does your property comply with the new Healthy Homes Standards? (Yes or No)			
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External and Internal photos included (Yes or No) (If No, then state why)		Floor Plan included (Yes or (If No, then state why)	No)



	ACQUISIT	ION TO LEA	SE CHECKLIST	
Private Owner Name				
Email Address			Contact Number	
		PROPERTY DET	AILS	
Property Address for lease including Suburb, City, Postcode				
Property Floor Area (m2)		Build Year		Total Area of Kitchen/Dining/Living room (m2)
Current status of property	Va	cant	Tenanted (date tenant will vacate)	Other
		PROPERTY FEAT		8
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Do the facilities run on Gas or Electric			Study or Sunroom	
Laundry facility (Yes or No)			Type of Clothesline, <i>i.e.;</i> <i>rotary, T-bar, none</i>	
Does the property come with a stove (Yes or No)			Does it come with other appliances, if so list them here	
Type of Heating, <i>i.e.; Heater, heat pump, fireplace, log burner etc.</i>			Curtains (Yes or No)	
Ventilation , <i>i.e.</i> ; <i>Range hood in kitchen or Extractor fans in bathroom, state where if yes</i>			Type of flooring, <i>i.e.;</i> carpet, floorboards	
Insulation details; write down where its located and R-values and when it was last inspected				
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Type of Property, <i>i.e.; Standalone, units, apartment complex, duplex</i>			Single or Multi Storey:	
Single, Shared Driveway, Common Area, or Jointly Owned Access Lot			Contour of Section, <i>i.e.;</i> <i>flat, sloping</i>	
Exterior Cladding, i.e.; brick, cladding etc.				
is the garage internal or external			Parking facilities	4
Is there a sleep out, shed or additional structure apart from the house			Are there other external facilities, <i>i.e.; pool, spa</i>	
Is there fencing around the property, please give details				
		LEGAL DETAI		
Cross-lease or Freehold			Body Corporate (Yes or No)	
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Any additional information that may not have been mentioned above				
External and Internal photos included (Yes or No) (If No, then state why)			Floor Plan included (Yes o (If No, then state why	

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Index of the second of the	20 July 1	Surveyed by Scale 1.250 Date October 1989	10	FLATS 1, 2 ON SECTION 102, TOWN OF RAWELE	SQ 59437 SQ 59437 SQ 59437 SQ 50890 SQ 50890 SQ 50890 SQ 50890 SQ 50890 SQ 50890 SQ 59437	SO NAND DISTRICT North Awardamuka SURVEY BLK. & DIST XIV. Mangamuka NZMS 261 SHT RECORD MAP No	
Racystand Cwiners Racystand Cwiners Noto: The beconderives of the areas to be leased and the asterior Bress of the asterior Amon (1) (1) (1) (1)			1 8	8+° 35' 2+68			
Approvals Approvace					10	7	

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x ^r		Approvals Approved
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Sec. 100		
Sec. IUU		
		Ragistared Owners
		Note: The bound arles of the areas to be leased are the exterior faces of the cuter walls Areas (Areas (Areas)) to be subject to restrictive covenants Covenant boundaries are not visibly defined
		New Cat Allocated Flat 1; CT. 790/210 Flat 2, CT. 790/211
Sac. 101	1 99	Pursuant to Section 314 of the Local Government Act 1974 I hereby certify that construction of the buildings depicted hereon as Flat 1 & 2 commenced after 1st April 1979 and a building permit for the construction of Flats 1 & 2 depicted has been issued by the Far North District Council pursuant to its By-laws.
а Э		Dated this 29th day of November 1989
		Authorised Officer Far North District Council
		1, Robert Szlwyn Bryant of Whongaez, Registered Surveyor and hoder of anannual practicing certificate teneby certify that the buildings shown hereon are erected in the positions shown and are situated within the bandonies of CT 67C/654 and that the plan is correct
22 /2.0		Dated 6 10 89 Sugarture deplemment Total Area. 1242 m2
	t.	
		(omprised in
		Registered Surveyor and holder of an annual practising certificate for who may act as a registered surveyor pursuant to ection Z5 of the Survey Act 1986) hereby certify that this our has been made from surveys executed by me or under no directions, that both plan and survey are correct and have been made in accordance with the Survey Regulations 1972 or may regulations made in substitution thereof. Dated at this day 19 Signature
		Field Book p. Traverse Book p. Reference Plans
	3	Examined Correct WAllampton
		Approved as to Survey
	Σ.	30,110,189 (Chief Surveyor
		Deposited this
	TERRITORIAL AUTHORITY Haking County	District Land Registrar
WENE.	Surveyed by Registern & Brycant	File DP 134735
	Scale 1:250 Date October 1989	Instructions









