



R A VALUATION SERVICES LIMITED
VALUATION QUESTIONNAIRE - ADDITIONAL BRANCHES (OP2)

The following questionnaires should be completed, as fully as possible, to enable R A Valuation Services Limited to perform a valuation for the business.

Please complete a Valuation Questionnaire (OP2) for each additional outlet.

In addition please provide the following information:

Internal and external photographs

**A copy of the last three years trading accounts
(if separate for each branch)**

**If applicable, your personal views on the business -
why it is good, bad or indifferent**

Please do not provide other supporting documents unless requested

GENERAL INFORMATION:

Ref:

Your Name:

Branch Name:

We have tried to make this questionnaire as easy as possible to complete, should you require any clarification or assistance please do not hesitate to contact us on 01425 402402. Alternatively please visit our website www.ravaluationservices.co.uk

Return your completed questionnaire either by email to info@ravaluations.com or post in the envelope provided to:

R A Valuation Services Limited
Elizabeth House
Unit 13 Fordingbridge Business Park
Ashford Road
Fordingbridge
Hampshire SP6 1BZ



PLEASE COMPLETE RESPONSES RELATING TO THE SPECIFIC BRANCH ONLY

BRANCH DETAILS:

Outlet Address:

Postcode:

Telephone:

In what year was the branch established or added?

What is the role of the proprietor, partners or directors and the time spent by each working **(in this branch only)** in terms of days per week, covering the last 3 years (including yourself):

	Role:	Days per week in outlet:
1	<input type="text"/>	<input type="text"/>
2	<input type="text"/>	<input type="text"/>
3	<input type="text"/>	<input type="text"/>
4	<input type="text"/>	<input type="text"/>

Number of persons employed other than the principals:

Please detail the role of each member of staff:

	Role:	Days per week in outlet:	Approx length of service:
1	<input type="text"/>	<input type="text"/>	<input type="text"/>
2	<input type="text"/>	<input type="text"/>	<input type="text"/>
3	<input type="text"/>	<input type="text"/>	<input type="text"/>
4	<input type="text"/>	<input type="text"/>	<input type="text"/>
5	<input type="text"/>	<input type="text"/>	<input type="text"/>
6	<input type="text"/>	<input type="text"/>	<input type="text"/>
7	<input type="text"/>	<input type="text"/>	<input type="text"/>
8	<input type="text"/>	<input type="text"/>	<input type="text"/>

BRANCH DETAILS (continued):

Services provided at this branch:

What are the opening hours of the outlet?

PROPERTY DETAILS:

Is the property?

Dedicated to the outlet:

Practice and domestic combined:

Other (please specify):

What proportion of the space is used by the outlet?

%

Is the property freehold or leasehold?

If premises are **freehold**, who owns the freehold and is a rent paid by the business?

If the property is freehold what, in your opinion, is it's approximate current market value

(if you have not had a recent property valuation please give your best estimate)?

£

What would you consider to be an appropriate rent if leased?

£

If the property is **leasehold**, please give details of:

Term of lease:

years

Unexpired term remaining:

years

Review period, every:

years

Current rental:

£

per annum

Next review due:

If a rent review is due within a year, what would you expect a new rent to be (p.a.)?

£

PROPERTY DETAILS (continued):

What, in your view, is the general condition of the property today?

Excellent: Good: Fair: Poor:

What are the Current Rates payable? £ per annum

Briefly describe the amount of space, number of rooms, etc. and details of non practice utilisation e.g. letting or sub-letting, if any:

Does the outlet have shop frontage?

LOCAL TRADING CONDITIONS:

Is the location of the outlet?

Centre of town/city

Edge of town:

Suburbs:

Country/village:

Other (please specify):

Briefly describe, if you can, local trading conditions for the business (i.e. close to a bus stop or car park, shopping centre, depressed, expanding etc.):

Please state the competition in the immediate area and if opened in the last 2 years:

Are there any significant changes (such as town centre development, pedestrianisation, etc.) planned or expected within the next 2 years, and if so, how are they likely to benefit or affect the outlet?

FINANCIAL INFORMATION

(if accounts are for all branches combined, go to next section)

Have the accounts been prepared by qualified accountants?

Is there any reason why the last reported year's sales and trading profits should not be either repeated or exceeded in subsequent years?

CUSTOMER DETAILS:

Approximate number of eye examinations (both NHS & private) for the last three years and to coincide with the year ends of the accounts you have presented to us

Latest year:

Year 2:

Year 3:

What is the approximate split of business as a percentage of the total sales?

Eye examinations:

 %

Spectacles:

 %

Contact lenses:

 %

Accessories:

 %

What is the approximate split of eye examinations i.e. proportion of total examinations?

NHS:

 %

Private:

 %

What is the typical charge for a private examination?

£

Approximate % of examinations that produce no further business?

 %

FIXTURES, FITTINGS & EQUIPMENT:

In your opinion is the equipment in the outlet?

Modern:

Elderly:

Needing replacement:

Other (please specify):

Please give details of any material leasing or HP arrangements with equipment description, lease HP payments per month and term to go (include, if necessary, separate details):

Please supply details of important and recent (last 2 years) equipment purchases: