Rental Property Information Checklist



Your Full Name:			D	ate:		
	during the year please complet ur appointment if relevant):	te and return this form t	to us along with you	ur Indiv	idual Income Tax	
	PRO	PERTY DETAILS				
Address of Rental Proper	rty:					
Date Property Purchased:		Property Purchase Price:				
Date Property First Earned Rental Income:			Number of Weeks Available For Rent During the Year:			
Property Owners (including %):		_	Date Building was Built (Your best estimate will suffice):			
for private/other purpos	Loan been Refinanced or has es? If so, please provide all rel as well as an explanation of the	evant Bank	☐ Yes		□ No	
Please provide your	Property Manager Summary including any receip	y Report and/or Comp ts and evidence whe		ther In	come & Expenses	
Income						
Gross Rent:	\$					
Reimbursements receive	d: \$	\$				
Expenses						
Advertising for Tenants:	\$	Body Corporat	Body Corporate Fees:		\$	
Borrowing Expenses:	\$	Cleaning:	Cleaning:		\$	
Council Rates:	\$	Gardening / La	Gardening / Lawn mowing:		\$	
Insurance:	\$		Interest (Apportion for Private Portion of Borrowings):		\$	
Land Tax:	\$	Legal Fees:	Legal Fees:		\$	
Pest Control:	\$		Property Management Fees/Commission:		\$	
Repairs & Maintenance:	\$	Stationery, Tel & Postage:	Stationery, Telephone & Postage:		\$	
Capital Works (Building W/off):	\$	Water Charges	Water Charges:		\$	
Depreciation:	\$	Other:	Other:		\$	
Fixt	ures & Fittings & Impi	rovements Acqui	red During th	e Yea	ar	
Item			Date of Purchase		Purchase Cost	
					\$	
			\$			
Fixtures & Fittings Sold/Scrapped During the Year						
Item			Date of Dispos	sal	Sale Price	
					\$	
					A	