

RENTAL PROPERTY INFORMATION CHECKLIST 2017-2018

PERSONAL DETAILS		
Name: Mr., Mrs., Ms., Miss	Tax File No:	
Address:	Tel No:	
	E N	
	Fax No:	
Change of address? No Yes	E-mail Address:	
Date of Birth: Resid	dent Full Year? Yes/No	
PROPERTY DETAILS		
Address of Rental Property:		
,		
Date Property Purchased:	Date Property Built (approx.):	
Date Property First Earned Rental Income:		
	,	
Number of Weeks Property was rented this year:		
Ownership Details		
In Your Name Only:		
In Joint Names: 1	Ownership:	%
2	Ownership:	%
3	Ownership:	%
4.	Ownership:	%



$\ast\ast$ PLEASE PROVIDE YOUR PROPERTY AGENT SUMMARY REPORT AND/OR COMPLETE BELOW FOR INCOME & EXPENSES.

Income				
Gross Rent:	\$			
Other Rental Income:	\$			
Expenses				
Advertising for Tenants:	\$	Body Corporate Fees:	\$	
Borrowing Expenses:	\$	Cleaning:	\$	
Council Rates:	\$	Gardening / Lawn mowin	g: \$	
Insurance:	\$	Interest (Apportion for Private use of Borrowings	s): \$	
Land Tax:	\$	Legal Fees:	\$	
Pest Control:	\$	Management Fees / Commission:	\$	
Repairs & Maintenance:	\$	Stationery, Telephone & Postage:	\$	
		Water Rates & Charges:	\$	
Other:	\$	Other:	\$	
Do you have Building Allowance Report / Tax Depreciation Report? Yes / No (If yes, please provide us the report.)				
Depreciable Items Purchased During the Year				
Item		Date of Purchase	Cost	
Improvements Made During the Year				
Item		Date	Cost	
	,			

Dated this ______ day of ______ 20 _____

Signature of taxpayer: ______Name (Print): _____