

# Rental Property Information



Individual Tax Return 20\_\_ (Enter year)

Please e-mail, fax or post this form back to our office **PRIOR** to your appointment:

TO: Hyde Cooper Wells Accountants

FAX: (03) 5995 3477

ATTENTION:

E-MAIL: [info@hcwa.com.au](mailto:info@hcwa.com.au)

<b>CLIENT NAME:</b>		<b>CLIENT SIGNATURE:</b>	<b>X</b>
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## PROPERTY DETAILS

<b>Address of Rental Property:</b>			
<b>Date Property Purchased:</b>		<b>Date Property First Earned Rental Income:</b>	
<b>Number of Weeks Available For Rent:</b>		<b>Date Property Built:</b>	
<b>Ownership Details:</b>	<input type="checkbox"/> In Your Name <input type="checkbox"/> In Joint Names (please supply details)		

## INCOME

<b>Gross Rent:</b>	\$
<b>Other Rental Income:</b>	\$

## PROPERTY DETAILS

<b>Advertising for Tenants:</b>	\$	<b>Body Corporate Fees:</b>	\$
<b>Borrowing Expenses:</b>	\$	<b>Cleaning:</b>	\$
<b>Council Rates:</b>	\$	<b>Gardening / Lawnmowing:</b>	\$
<b>Insurance:</b>	\$	<b>Interest:</b>	\$
<b>Land Tax:</b>	\$	<b>Legal Fees:</b>	\$
<b>Pest Control:</b>	\$	<b>Property Management Fees/Commission:</b>	\$
<b>Repairs &amp; Maintenance:</b>	\$	<b>Stationery, Telephone &amp; Postage:</b>	\$
<b>Travel:</b>	\$	<b>Water Charges:</b>	\$
<b>Other: _____</b>	\$	<b>Other: _____</b>	\$

## DEPRECIABLE ITEMS

ITEM	DATE PURCHASED	COST
		\$
		\$
		\$
		\$

## IMPROVEMENTS / CONSTRUCTION COSTS

Please email, fax or post to our office a copy of your tax depreciation schedule prepared by third party (if you haven't already)

ITEM	DATE	COST
		\$
		\$
		\$