## **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:	Accelerate	Accounting Group	FAX:	(0	8) 6210 1377
ATTEN	TION:		E-MAIL:	ac	ccountant@accelerate.com.au
CLIENT	NAME:		CLIENT SIGNATURE	:	x

PROPERTY DETAILS											
Address of Rental Property:											
Date Property Purchased:		Date Property First Earned Rental Income:									
Number of Weeks Available For Rent:		Date Property Built:									
Ownership Details:	🗆 In Your Name	🗌 In Joint	In Joint Names (please supply details)								
INCOME											
Gross Rent:	\$										
Other Rental Income:	\$										
PROPERTY DETAILS											
Advertising for Tenants:	\$	Body Corporate Fees:		\$							
Borrowing Expenses:	Borrowing Expenses: \$			\$							
Council Rates:	\$	Gardening / Lawnmowing:		\$							
Insurance:	\$	Interest:		\$							
Land Tax:	\$	Legal Fees:		\$							
Pest Control:	\$	Property Management Fees/Commission:		\$							
Repairs & Maintenance:	\$	Stationery, Telephone & Postage:		\$							
Water Charges:	\$	Other:		\$							
Other:	\$	Other:		\$							
	DEPRECIA	ABLE ITEMS									
		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						
					\$						
					\$						
					\$						