Rental Property Information

Individual Tax Return 20___ (Enter year)

TO: Sheridans Accountants & Financial Planners

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



appointment:

ATTENTION:		E-MAIL: enquiries@sheridans.net.au			
CLIENT NAME:		CLIENT SIGNATURE: X			
	PROPERT	TY 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 Names (please supply details)			
INCOME					
Gross Rent:		\$			
Other Rental Income:	\$				
PROPERTY DETAILS					
Advertising for Tenants:	\$	Body Corpora	te Fees:	\$	
Borrowing Expenses:	\$	Cleaning:		\$	
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:	<u> </u> \$	Other:		\$	
DEPRECIABLE ITEMS					
ITEM			DATE PURCHASED		COST
					\$
					\$
					\$
					\$
	IMPROVEMENTS / C				
Please email, fax or post to o	our office a copy of your tax depre	ciation schedule		arty (i	1
ITEM			DATE		COST
					\$
					\$
					\$