Rental Questionnaire – 31st March 2023

Ensure this questionnaire is completed and included with your records

Client Name			Phone:		
Email:			Preferred ques ☐ Paper ☐ E	stionnaire fo Email E-	
			T		
Property Details					
Please provide us with the addresses of any rental properties you have. Address:			months, please p	If a property was not rented for a full 12 months, please provide details of why it was vacant.	
			- was vacant.		
Address: Address:					
Rental Income and Expenditure					_
Please supply bank statements clearly identifying and detailing all transactions that relate to the rental properties OR					
Please provide details of the following for each rental property. Use a separate sheet if necessary.					
Income: Total Rent Received	S				
Expenses: Accounting fees	3	Phone	\$		
Advertising (to rent)		Power	\$		
3 ,	<u> </u>	Rates	\$		
Insurance §		(including regional council rates)			
Legal fees \$	Repairs and Maintenar				
Management fees \$	3	(please attach details or invoices)			
Mortgage Interest \$	_		Valuation fees \$		
(attach copy of loan summary/statements from bank)		Water rates	\$		
Details of any other expense relating	ng to rental property:		\$		
			\$		
Details of visits to inspect property/conduct property business: Date Details Kilometres					
Home Office Expenses (if applicable)				
If part of your home is set aside pri relation to your rental property, you rental income. Please provide the Area used for Business:	may be able to claim		ome expenses agains		
Total Area of House & Workshop:		n	n²		
Power	\$				
Insurance (Building & Contents)	\$				
Interest (House Mortgage)	\$				
Rates (including regional council ra	ates) \$				
Repairs and maintenance	\$	 			
Other	Ψ ¢				
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Mixed Use Holiday Home (if applicable)			
Do you have a property (such as a holiday home that is used privately and also to derive income?			
Details of property			
Was the property empty for 62 days in the income year? If yes, please complete the following section so we can			
determine the amount of allowable deductions.			
Mixed Use Holiday Home - Information Required			
The number of days the property was empty during the income year			
The number of days the property was used by family or associated persons* during the income year			
* Associated persons include close relatives, or if owned by an entity, persons associated with the entity owning the property			
If there is more than one tenant who used the property through the year, please attach details.			
Name of tenant:	Ш		
Relationship to owner (if any):			
Amount of rent they paid: \$			
Dates rented (From: To)			
Expenses incurred in respect of the property (the list below is not exhaustive – details of all expenses will be required):			
Cost of advertising for tenants \$			
Mortgage interest \$			
Rates \$			
Insurance \$			
Repairs/maintenance for general wear and tear \$			
Other (please give details)			
Other Details Required (if applicable)			
Solicitors Settlement Statement			
Sale and Purchase Agreement			
Loan details for property purchased			
A copy of the latest Rateable Valuation			
A list of chattels with their dates and value for properties bought or sold during the year			
Thank you for completing this questionnaire. Don't forget to sign it.			
To: WestNet Tax Accounting Limited Terms of Engagement We hereby instruct you to prepare our Taxation Returns for the 2023 year. I undertake to supply all information nectoo carry out such services and will be responsible for the accuracy and completeness of such information. If any partitis document is not completed, WestNet Tax Accounting Ltd will assume that the required figure is nil or this question does not apply to my/our accounts. You are hereby authorised to communicate with my bankers, solicitors, finance companies and all government agencies to obtain such information as you require in order to carry out the above assignments.	t of on		
You are to represent me/us as my/our tax agent. All income tax returns will be signed by me/us however you are auth to sign any other taxation return on behalf of myself/ourselves or any of my/our associated entities.	orised		

Signature _____ Date ____

me/us.

I/We also accept that all WestNet Tax Accounting Limited's accounts are due for payment within 10 working days following invoice date unless a prior arrangement exists. I/We accept that any collection costs you incur will be fully recoverable from