

Rental Properties End of Year Checklist – 31 March 2024

Ensure this checklist is completed and included with your records

Client Name		Phone:	
Balance Date	31 March 2024	Fax:	
		Email:	
To: Walthall Ward Lin	nited		
Client Acceptance			
responsibility for the amy/our affairs or a state	tyou will rely upon the information provided by m ccuracy and completeness of the information provid tutory audit. I/We understand that you are not able to bility for the accuracy and completeness of the inform	led. You are i provide any	not instructed to undertake a detailed review of assurance on my/our financial statements and
	he Financial Statements and Taxation Returns are posibility to any person, other than me/us, for the cont		
All other terms and co when I/we became a c	onditions of this engagement are the same as those client.	e referred to	in the original Engagement Letter I/we signe
such information as you Revenue about all tax	rised to communicate with my/our bankers, solicitors ou require in order to complete the above assignn types except child support (NCP or CPR) in order t I Inland Revenue media and communication channe	nents. I/we a o complete ti	uthorise you to obtain information from Inland
	me/us as my/our tax agent. All income tax returns of any of my/our as		
Signature		_	Date

Convenient time to call you is:					
Alternative phone numbers are:					
When do you want your accounts completed by?					
Would you like us to supply a copy to your bank?	Yes □ No □ (Tick One)				
If your accounts are to be supplied to your bank, please advise the name of your current bank manager:					
Has the nature of your business changed in any way during the past 12 months?					
If yes, please provide brief details:					
Trust Clients					
☐ Please provide information regarding changes to the Trust (including trustee/beneficiary changes, child beneficiary ages, etc), together with copies of any Deeds of Variation, Deeds of Retirement or Deeds of Appointment					
☐ Please provide copies of any Deeds of Acknowledgement of Debt or Forgiveness of Debt during the year					
☐ Please provide details of any gifts made to the Trust during the year					

Property Details						
Please provide us with the a Address: Address: Address:			If a property was not rented for a full 12 months, please provide details of why it was vacant.			
Rental Income and	Expenditure			✓		
Please supply bank stateme OR Please provide details of the	ents clearly identifying and d			al properties		
Income:						
Total Rent Received	\$					
Expenses:						
Accounting fees	\$	Phone	\$			
Advertising (to rent)	\$	Power	\$			
Bank fees	\$	Rates	\$			
Insurance	\$	(including regional council rates)				
Legal fees	\$	Repairs and Maintenance \$				
Management fees	\$	(please attach details or invoices)				
Mortgage Interest	\$	Valuation fees	\$			
(attach copy of loan summa	ry/statements from bank)	Water rates	\$			
Details of any other expense	e relating to rental property:					
			\$			
			\$			
Details of visits to inspect or	ronerty/conduct property bus	siness:				
Details of visits to inspect property/conduct property but Date Details			Kilometres			
Other Details Requi	i red (if applicable)					
Solicitors Settleme	nt 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						

Mixed Use Holiday Home					
Does this entity have a property (such as a holiday home or a bach) that is used privately and also to derive income?					
If yes, provide 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 allowal	Yes □ No □ ble deductions.				
Mixed Use Holiday Home – Information Required					
The number of days the property was empty during the income year					
The number of days the asset was used by family or associated persons* during the income year OR where income from any person received was less than 80% of market rate * 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 o	details.				
Name of tenant:					
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 o required):	f all expenses will be				
Cost of advertising for tenants	\$				
Cost of repairing damages caused by tenants	\$				
Number of days spent in the property while repairing damages caused by tenants					
Mortgage interest	\$				
Rates	\$				
Insurance	\$				
Repairs/maintenance for general wear and tear	\$				
Other (please give details) :					

Thank you for completing this checklist - don't forget to sign it

NOTES