

P: 1300 99 06 12 **F:** 1300 99 06 13 **W**: www.washingtonbrown.com.au

Tax Depreciation Application: Metro Residential

If you are unsure about any of the information below, please complete as much as you can and send the application form to us. This way we can speed up the process, by booking in your property inspection, while we help you source any missing information.

PROPERTY DETAILS					
Investment property address:					
Are you the first owner of the subject property:					
Date of settlement: Date first available for rent:					
Date of construction commencement or appro	ximate buil	ding age (if k	(nown):		
ADDITIONAL PROPERTY DETAILS (IF APPL	LICABLE)				
Have you renovated the property? Yes	No	Is the pro	perty strata titled?	Yes	No
Have you purchased anything for the property	(e.g. Blind	s, Microwave	e)?	Yes	No
If yes, please provide the item description, cost and purchase date details on a separate page					
PROPERTY ACCESS DETAILS					
Please provide the contact details for the person we should liaise with regarding property access.					
Name:	Numbe	er:			
The person nominated above is the: Prope	rty Manage	er Tena	int Owner	Other	
OWNERSHIP DETAILS					
Durch one Name or Entitur					
, <u> </u>					
Email:					
Mobile: Phone:			Fax:		
PAYMENT DETAILS					
Once we have received all required informatio	n from you	, we will com	mence preparation	n of your r	eport.
When your report nears completion, we will se		il requesting	payment. This em	ail will cor	ntain your
invoice and will detail accepted payment meth					
The fee for this form of service is \$660.00 GS prior to us forwarding you the report. This fee				e require p	payment
phot to us forwarding you the report. This fee	is valid arti	I December	0130 2010		
I/We confirm that the above information is corr	rect, and th	at we are un	aware of the actua	l construc	ction costs.
Client of:					_
LEIFIELD	Name:				
Date:					

Please return completed form to admin@washingtonbrown.com.au