



White Rock Tax & Accounting Inc.

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REAL ESTATE RENTALS

Address: _____

For the Period: _____ to _____

Number of units _____

Rental Revenue \$ _____

Is the rental part of your home? ___yes ___ no

If yes what is the square footage of the rental? _____ sq. ft.

What is the total square footage of your home? _____ sq. ft.

Expenses

Advertising	\$ _____
Insurance	_____
Mortgage Interest	_____
Office	_____
Legal, accounting, and other professional fees	_____
Management and administration fees	_____
Maintenance and repairs	_____
Property taxes	_____
Travel	_____
Utilities	_____
Motor vehicle expenses	_____
Did you purchase any fixed assets over \$300 during the year? Please do not include these values in previous categories.	_____
Equipment	_____
Furniture and fixtures	_____
Other: _____	_____

Any other Rental expenses not shown

1. _____
2. _____
3. _____
4. _____

Do you share your rental with your spouse? ___yes ___ no _____%

Do you share your rental with a partner? ___yes ___ no

If yes we will need their:

Percentage of ownership: _____%

Name: _____ SIN #: _____

Address: _____ Percentage of ownership: _____%

Name: _____ SIN #: _____

Address: _____ Percentage of ownership: _____%

Name: _____ SIN #: _____

Address: _____

Questions?

Email us at info@whiterocktax.ca

Or visit our website at www.whiterocktax.ca