## TAX DEPRECIATION ORDER FORM

PERSONAL DETAILS					
Contact Person Names					
Postal Address				State	Postcode
Email Address 1				Mobile / Phone 1	
Email Address 2				Mobile / Phone 2	
PROPERTY DETAILS					
Name/s the report is to be made ou	itto				
Complex Name (if applicable)					
Property Address				State	Postcode
				<u>i</u>	i
INFORMATION REQUIRED (PLEAS	E COMPLETE EITHER OPTION 1 OR OI	PTION 2 BELO	W)		
1. Purchased existing property OR			2. Constructed property (ie: engaged a builder)		
Purchase Price			Construction Cost		
Settlement Date			Settlement Date (Land)		
			Land Cost		
Construction Completion Date (If known)			Construction Completion Handover Date		
Any additional items since purchase - F	Renovations, adding / replacing white goo	ds, furnitures Y	′/N (if yes, please provide	e cost and installation date, we will the	en include this in your reports
ACCOUNTANT					
ccountant or Financial Advisor Company					
Phone	Email Address				
PAYMENT DETAILS					
	ging agent provide the above details in detailed below: If you wish to pay by ba				
Amount Check with Office	☐ Bank Transfe	er	☐ Visa	☐ Mastercard	Amex
Please charge my credit card, number					CCV numbers
Name of Good		Sizzat		Ent. Date	
Name on Card		Signature		Expiry Date	

Call 1300 829 221 or visit www.propertyreturns.com.au

