



PLATFORM TAX & CONSULTING

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RENTAL PROPERTY

Client Name _____

Property Address _____ City _____ State _____ Zip _____

Number of days available for rent during the year. _____

GROSS RENTS \$ _____
Other Income \$ _____

VEHICLE EXPENSES
Miles driven for Rental _____

EXPENSES

Advertising \$ _____
Association Dues \$ _____
Cleaning & Maintenance \$ _____
Commissions \$ _____
Gardening/Yardcare \$ _____
Insurance \$ _____
Legal and professional \$ _____
Licenses & Permits \$ _____
Management Fees \$ _____
Interest \$ _____
Pest Control \$ _____
Repairs \$ _____
Supplies \$ _____
Real Estate Taxes \$ _____
Utilities \$ _____
Wages & Salaries \$ _____
Other:
_____ \$ _____
_____ \$ _____
_____ \$ _____
_____ \$ _____
_____ \$ _____

LARGE REPAIRS OR PURCHASES

Bathroom/Kitchen Remodel \$ _____
Roof \$ _____
Windows \$ _____
Appliances \$ _____
Carpet \$ _____
_____ \$ _____
_____ \$ _____
_____ \$ _____

Type of property: Commercial _____ Residential _____