



We just love a good completed questionnaire!

## 2025 RENTAL QUESTIONNAIRE

NAME:

E-MAIL ADDRESS:

CONTACT PERSON:

HOME PHONE NO:

MOBILE NO:

POSTAL ADDRESS:

RESIDENTIAL ADDRESS:

### AUTHORITY AND TERMS OF ENGAGEMENT

I hereby instruct you to prepare my Financial Statements and Tax Returns. I accept responsibility for the accuracy and completeness of the information supplied in this questionnaire which is to be used in the preparation of my financial statements. You are not to complete an audit, nor do I wish you to undertake a detailed review of my affairs in order to substantiate the accuracy of my information, and therefore you are not asked to provide any assurance on my financial statements.

I understand your work cannot be relied on to detect error and fraud and that you accept no liability for the accuracy and completeness of the information supplied by me. I further understand that the financial statements will be prepared at my request and for my purposes only and that you will not be liable for any losses, claims or demands by any third person.

I also accept responsibility for all other records and information supplied to you other than those listed above. I accept responsibility for any failure by me to supply all relevant records and information to you.

You are hereby authorized to obtain from any third party any records or information you require for the purpose of preparing my Financial Statements and Income Tax Returns and accordingly any such third party is authorised to provide you with information required.

SIGNED:

\_\_\_\_\_  
(Please enter full name if signing electronically, as this is an Inland Revenue requirement)

DATE:

\_\_\_\_\_

Your time and effort in completing this form is much appreciated by the team at Perriams as it allows us to complete your Financial Statements more efficiently.

**DON'T FORGET TO SIGN YOUR QUESTIONNAIRE**  
**IT'S AN INLAND REVENUE REQUIREMENT**

Please answer all questions below. If “yes” could you please then complete the relevant sections on the following pages where applicable.

		Yes	No	Section
1	What record keeping system have you used during this financial year? Or have you used a manual system?			
	If you have used a computerized system, we do not require anything further for the rental property at this stage, just sign the Questionnaire and return to us. If a manual system, please provide:			
	- Bank Statements (Please provide copies of all statements up to and including 31 March 2025).	<input type="checkbox"/>	<input type="checkbox"/>	
	- Spreadsheets / Cashbook (If yes, please provide copies).	<input type="checkbox"/>	<input type="checkbox"/>	
	- Property Manager reports (If yes, please provide the yearly summary)	<input type="checkbox"/>	<input type="checkbox"/>	
	- Other	<input type="checkbox"/>	<input type="checkbox"/>	
2	Did you receive any rental income?	<input type="checkbox"/>	<input type="checkbox"/>	2
3	Did you incur vehicle running costs? <a href="#">Please specify number of Km's.</a>	<input type="checkbox"/>	<input type="checkbox"/>	3
4	Have you purchased a property or chattels during the year?	<input type="checkbox"/>	<input type="checkbox"/>	4
5	Have you sold a property during the year?	<input type="checkbox"/>	<input type="checkbox"/>	5
6	Did you have a loan or mortgage during the year? <a href="#">Please Include a copy of your annual loan summary.</a>	<input type="checkbox"/>	<input type="checkbox"/>	6
7	Are you claiming for the Home Office Allowance? <a href="#">Please complete section 7.</a>	<input type="checkbox"/>	<input type="checkbox"/>	7
8	Did you have any rent owed to you as at 31 March 2025?	<input type="checkbox"/>	<input type="checkbox"/>	8
9	Did you have any accounts payable (owed by you) as at 31 March 2025?	<input type="checkbox"/>	<input type="checkbox"/>	9
10	Have your land and/or building/s been affected by the earthquakes?	<input type="checkbox"/>	<input type="checkbox"/>	10
11	If you are completing this questionnaire for a Look Through Company, please complete Section 11?	<input type="checkbox"/>	<input type="checkbox"/>	11
12	Do you find our newsletters informative?	<input type="checkbox"/>	<input type="checkbox"/>	
13	When we commence work on your financial statements if there are any queries or outstanding information required please advise if you would prefer that we communicate with you either by e-mail or telephone.	E	T	
		<input type="checkbox"/>	<input type="checkbox"/>	
		E	P	
14	Would you prefer to receive our newsletters via email or post?	<input type="checkbox"/>	<input type="checkbox"/>	
	If address is different from that provided on the front page, please specify:			
		E	P	
15	Would you prefer to receive your end of year Financial Statements electronically or as a bound copy via post?	<input type="checkbox"/>	<input type="checkbox"/>	
	If address is different from that provided on the front page, please specify:			

WHAT CAN PERRIAM AND PARTNERS DO TO PROVIDE A BETTER SERVICE TO YOU? PLEASE TAKE THIS OPPORTUNITY TO LET US KNOW.


**2 RENTAL INCOME**

Please fill in table the below, or alternatively complete the Rental Income & Expense Schedule in Excel (Located on our website under questionnaires).

<b>Address of Property:</b>			
The number of months the property was available for rental during the year: _____			
	\$	\$	\$
Months let			
Rent Received:			
Advertising			
Accountancy fees			
Property Management Fees			
Bank Charges			
Cleaning and Rubbish			
Insurance			
Inspection Costs			
Legal Expenses			
Loan Fees			
Mortgage Interest			
Mortgage Principal Repaid			
Mortgage repayment insurance			
Mortgage Break Fees			
Postage and Stationery			
Rates			
Repairs & Maintenance (see below)			
Telephone and Tolls			
Seminars and Magazines			
Valuation Fees			
Other (provide details)			



5 PROPERTY/CHATELS SOLD

Property Address: \_\_\_\_\_

Enclosed/Attached

Please attach all legal statements, including the Solicitors settlement statement

Description	Date	Sale Price (Incl GST)	Tick if Scrapped
		\$	<input type="checkbox"/>

6 LOANS/MORTGAGES

Please provide the following records:

Enclosed/Attached

- Statements recording interest paid and principal owing at balance date.

Details as below:

Lender	Guarantor	Owing at Balance Date	Interest Rate	Term of Loan	Security
			%		
			%		
			%		
			%		
			%		

7 HOME OFFICE ALLOWANCE

If you do not use a property manager, please provide the following:

The annual total of the following expenses are required in order to complete the calculations:

(please do not write same as last year)

Rent (if property not owned)	\$ _____	Rates and Water Rates	\$ _____
Insurance	\$ _____	Security System (monitoring charges)	\$ _____
Repairs & Maintenance	\$ _____	Interest (on Mortgage)	\$ _____
Power and Gas	\$ _____	Body Corporate Fees	\$ _____

Note: if you have supplied details of your house and the area used for business purposes in prior years, and the details have not changed, **you do not need to supply the following information.**

Total floor area of the house:

\_\_\_\_\_ m2

Total floor area used for business purposes:

\_\_\_\_\_ m2

**8 RENT RECEIVABLE**

Rent owed to you as at 31 March 2025

\_\_\_\_\_ \$

This would relate to any rent owing to you as at 31 March 2025 but not yet received as at that date.

**9 ACCOUNTS PAYABLE**

Please provide a list of accounts payable (Owed by you 31 March 2025):

Name of Creditor	Amount	Expense Type

**10 HAVE YOUR LAND AND/OR BUILDING/S BEEN AFFECTED BY THE EARTHQUAKES?**

**Yes No**

Have you completed all Earthquake Repairs on the property?

Please provide all details.


**11. LOOK THROUGH COMPANY (LTC)**

**Yes No N/A**

Are the loans in the company guaranteed personally by the shareholders?

**12. MIXED USE HOLIDAY HOME**

**Yes No**

Do you 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:


**Yes**      **No**

Was the property empty for 62 days or more in the income year?

    

If yes, Is the property managed by a Property Management Company?

    

If Yes, Please provide the Annual Rental Summary

If you manage this property yourself then please complete the following section so we can determine the amount of allowable deductions.

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

*\* Associated persons include close relatives, or if owned by an entity, persons associated with the entity owning the property*

OR Where income from any person received was less than 80% of market rate

\_\_\_\_\_

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THANK YOU

Lastly, you've got this far, so many thanks for completing this questionnaire.