

Rental Questionnaire – 31 March 2023

Ensure this questionnaire is completed and included with your records

B:HIVE Smales Farm 74 Taharoto Rd Takapuna Auckland 0622

Lynch and Associates Limited

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T: +64 9 366 6005

Client Name		Phone:	
Balance Date	31 March 2023	Email:	

To: Lynch & Associates Ltd

Terms of Engagement

I/We hereby instruct you Lynch & Associates Ltd and staff/contractors as applicable to prepare our Taxation Returns for the 2023 year. I/we undertake to supply all information necessary to carry out such services and will be responsible for the accuracy and completeness of such information.

Authority is given to obtain information from Inland Revenue, other government agencies and financial institutions about all tax types (except child support), bank and loan accounts in order to complete the above assignments. This includes obtaining information through all Inland Revenue media and communication channels including electronic ones.

I/We give authority for any refund credits to be transferred to Lynch & Associates Ltd's trust account prior to refund to me/us.

I/We authorise your organisation to act as our agent for ACC levy purposes for all associated entities. This authorisation allows your organisation to query and change information on my/our ACC levy account(s) through ACC staff, and through MyACC for Business. This authority will also allow your organisation's main representative discretion to delegate access to my/our ACC information to other members of your organisation. Other delegated members of your organisation will also be able to query and change information on my/our ACC levy account.

You are to represent me/us as my/our tax agent. All income tax returns will be signed by me/us however you are authorised to sign any other taxation return on behalf of myself/ourselves or any of my/our associated entities.

I/We also accept that you have the right to charge interest on overdue accounts at the rate of 1.5% per month, and that all accounts are due for payment by the 20th of the month following invoice date. The charging of such interest will be at your discretion. I/We accept that any collection costs you incur will be fully recoverable from me/us.

The authority to act must be signed by all appropriate signatories i.e. all partners in a partnership, trustees in a trust and directors in a company (except where recorded that one director has specific signing authority, or one person has recorded delegated authority from the other owners/members to sign on their behalf). Trustees who are acting as a Trustee in their professional capacity are not required to sign an authority to act, unless all trustees in the Trust are professional trustees, in which case at least one Trustee should sign. See IRD Information Authority for full details of this requirement.

Name	IRD Number	Signature	Date	

Under the Companies Amendment Act 2014 there is now a requirement for all directors to provide their place of birth and date of birth AND in addition, there must be at least one director that either lives in New Zealand; or lives in Australia and is a director of a company incorporated in Australia:				
Director	Date of birth	City / Town of birth	Country of birth	Current residential address

Property Details		
Please provide us with the addresses of any rental properties you have.	If a property was not rented for a full 12	
Address:	months, please provide details of why it	
Address:	was vacant.	
Address:		
Rental Income and Expenditure		
Please supply bank statements clearly identifying and detailing all transac	tions that relate to the rental	
properties		
OR		
Please provide details of the following for each rental property. Use a sepa	arate sheet if necessary.	
Income:		
Total Rent Received \$		
Expenses: Accounting fees \$ Phone	۶	
Advertising (to rent)	↓ \$	
Bank fees \$ Rates	\$ \$	
Insurance \$ (including regional c	ouncil rates)	
Legal fees \$ Repairs and Mainter		
Management fees \$ (please attach deta	ils or invoices)	
Mortgage Interest \$ Valuation fees	\$	
(attach copy of loan summary/statements from bank) Water rates	\$	
Details of any other expense relating to rental property:		
।		
Details of visits to inspect property/conduct property business:		
Date Details	Kilometres	
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· · · ·		
Rental Income from Overseas		
Provide details of any income received from overseas, including rental		
income and any tax deducted from this income		
Home Office Expenses		
If part of your home is set aside principally for use as an office/workshop/st	orage area, please provide the fo	ollowing
details:		
Address for Home Office		
Home Office area: - no change as per previous year		
OR Area used for Business: m ²		
Total Area of House & Workshop: m ²		
	<u>e Metre Rate Method</u> (see below	note)*
Power \$ Insurance (Building & Contents) \$		
Interest (House Mortgage) \$ Interest (House	e Mortagge) \$	
	ng regional council rates)\$	
Rent <u>\$</u> Rent	\$	
Repairs & Maintenance \$		
Telephone rental \$		
Other \$		
Total \$		
*Would you like to use the IRD rate? Currently it is \$47.85 per square metre.	This allowance doesn't cover Mo	rtgage
Interest, Rates or Rent costs so we would still require these amounts.		

Covid-19 Wage Subsidy and other Covid-19 support		
Date rec:// \$	payment? (please note all dates and receipts) Date rec:/ \$ Date rec:/ \$ Date rec:/ \$	
 Where Wage Subsidy payments have been received for st (shareholders/partners/trustees/beneficiaries/owners) of th Amounts received for each stakeholder Whether amounts received were for full-time or point 	ne business please provide details of the following:	
Date rec: _/_/_ \$? (please note all dates and receipts) Date rec: _/_/_ \$ Date rec: _/_/_ \$ Date rec: _/_/_ \$	
 Where Covid-19 Leave Support Payments have been recer (shareholders/partners/trustees/beneficiaries/owners) of the Amounts received for each stakeholder Whether amounts received were for full-time or page 	ne business please provide details of the following:	
Have you received Covid-19 Short-Term Absence Paymer Date rec: /_/_ \$ Date rec: /_/_ \$ Date rec: /_/_ \$	its? (please note all dates and receipts)	
 Where Covid-19 Short-Term Absence Payments have been (shareholders/partners/trustees/beneficiaries/owners) of th Amounts received for each stakeholder Whether amounts received were for full-time or page 	ne business please provide details of the following:	
Have you received Resurgence Support Payments? (pleas Date rec:/\$ Date rec:/\$ Date rec:/\$	e note all dates and receipts)	
Have you received a Covid-19 Cultural Sector Emergency Please provide details if it is an "other" Covid-19 support po Date rec://_ \$ Date rec://_ \$		
Have you received the Covid-19 Small Business Loan? Date rec:// \$		
Have any amounts of Covid-19 support payments been re Please provide details of payment and reason for repayme Date paid back://_ \$		
Residential Land Withholding Tax Have you sold residential property in New Zealand where I	Residential	
Land Withholding Tax has been deducted and paid to the provide details e.g. IR1100 Residential land withholding tax other sale and purchase documents.	e IRD? If so,	

Residential Property Sales			
Have you sold any residential property during the year (not otherwise detailed on the information provided)? If yes, when was the property purchased? If it was purchased with 10 years of the sale date,		\$	
what was the original purchase priceand the sale price?			
Mortgage Interest Paid on Residential Properties			
Have you incurred interest on residential properties owned (which is not your main family home or 'new build')? Is the interest also against properties other than residential rentals? If so, please provide details of amount of interest and dates paid.			
* A new build is a self-contained residence that receives a Code Compliance Certificate confirming the residence was added to the land on or after 27 March 2020			
Mixed Use Holiday Home			
Does this entity have a property (such as a holiday home or a bach) that is 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, please complete the following section so we can determine the amo	ount d	Yes 🛛 No 🗆 of allowable deductions.	
Mixed Use Holiday Home – Information Required			
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* du OR where income from any person received was less than 80% of market ro * Associated persons include close relatives, or if owned by an entity, perso owning the property	ate		
If there is more than one tenant who used the property through the year, p Name of tenant:	lease	attach details.	
Expenses incurred in respect of the property (the list below is not exhaustive required): Cost of advertising for tenants Cost of repairing damages caused by tenants Number of days spent in the property while repairing damages caused by Mortgage interest Rates Insurance Repairs/maintenance for general wear and tear		\$ \$	
Other (please give details) :		۲	

Mixed Use Boat or Plane	
Does this entity have a boat or plane (with a market value of \$50,000 or greater), that is used privately and also to derive income? Yes 🛛 No 🖓	
If Yes, provide details: Description: Market value: \$	
Was the asset unused for 62 days or more in the income year? Yes ONO O If yes, please complete the following section so we can determine the amount of allowable deductions.	
Mixed Use Boat or Plane – Information Required	
The number of days the asset was unused during the income year The number of days the asset was used by family or associated persons* during the income year OR where income from any person received was less than 80% of market rate * Associated persons include close relatives, or if owned by an entity, persons associated with the entity owning the property	
For non-associated persons where payment received is at least 80% of market value: Number of days the asset was used: Income received: \$	
Expenses incurred in respect of the property (the list below is not exhaustive – details of all expenses will be required):	
Cost of advertising for hireage \$ Cost of repairing damages caused by hireage \$ Operating costs / supplies \$	
Insurance \$ Repairs/maintenance for general wear and tear \$ Other (please give details)	
Other Details Required (if applicable)	
 Solicitors Settlement Statement Sale and Purchase Agreement Loan details for property purchased A copy of the latest Rateable Valuation Any notifications provided to IRD of residential property held on revenue account (taxable on sale) A list of chattels with their dates and value for properties bought or sold during the year 	

Thank you for completing this questionnaire Don't forget to sign it