RENTAL CHECKLIST |DW AGOSTO TAX PLANNING, LLC

This form is for Sole Proprietors or Single-Member LLCs. Please complete a separate form for each property.	
The purpose of this form is to compile your data and necessary documentation. Please complete to reduce billable time.	

TAXPAYER NAME:	EIN (if not SS)
BUSINESS NAME:	
RENTAL ADDRESS	
WHEN DID YOU START RENTING THE PROPE	ERTY?
ARE YOU UP-TO-DATE ON YOUR PROPERTY	TAXES?
HOW MANY DAYS DID YOU USE THE PROPE	RTY FOR PERSONAL REASONS THIS YEAR?
HOW MANY DAYS WAS THE PROPERTY AVA	ILABLE FOR RENT, EVEN IF IT WAS UNOCCUPI
EARNED INCOME	
DEPOSITS	HOME OFFICE?
EXPENSES:	TOTAL SQ FT OF HOME
ADVERTISINGBANK FEES	
1099 LABOR INSURANCE	VELICIE 1 TVDE
MODIC INITEDECT	TOTAL MILES DRIVEN
OTHER INTEREST	RUCINECC MILEC DRIVEN
LEGAL	
ACCOUNTING	VEHICLE 2 TYPE
OFFICE SUPPLIES	
EQUIP RENT	BUSINESS MILES DRIVEN
REPAIRS	
MAINTENANCE	
SUPPLIES	
PROPERTY TAXES	
PHONE/INTERNET	
UTILITIES	
OTHER:	including cost and purchase date.

