

1. Personal details:

a) Name of property owner:				
b) Residential address:				
c) Email address:				
d) Contact number:		_		
e) Alternate phone number:		_		
2. Property Details: a) Address of investment property:				
Please include suburb, state and postcode.				
b) Type of property (house, apartment, granny fla	t, town	house, etc):		
c) Was the property built under your ownership:		☐ Yes	□ No	
If no:	If Yes	•		
Purchase price: \$	Build	cost: \$		
Build cost (if known): \$	Date o	of completion:		
Date of exchange:	Date o	of first lease:		
Date of settlement: *please attach a copy of your build contract if				
Date of first lease:	availa	ble.		
Age of property if known:				
d) Have you occupied the property for any period e) Has the property been renovated either by you If yes, please provide details:			□ No □Yes □No	
Details of works (add more rows if required or as summary document)	ttach	Cost of works	Date of works	

If works carried out by previous owners, please provide details of works you believe have been carried out, exact dates and costs are not required unless known.

Please note that due to ATO regulations, we will be required to sight tax invoices for any renovations to be included if you upgrade to the full report.



f) Have you provided any furn	□Y	es □No	□No		
If yes, please provide details:					
Furniture Item (add more rosummary document)	ows if required or a	ttach	Cost of item	Date of purchas	e
Please note that due to ATO re items to be included if you upg and/or first rented after 1/7/1 of lease.	rade to the full rep	ort. If your p	property was pur	chased after 9/5/17	7
3. Silver Checklist:					
a) Is the property part of a co	mplex?		□ Y	es 🛛 No	
If yes, number of resi <i>This can be estimated</i>			ailboxes at the fr	ont of the complex.	
Total number of floor	s in the building: _				
b) Standard/ Quality of const	ruction:				
Construction method: ☐ Double Brick Cavity		herboard Cl	adding		
☐ Brick Veneer	☐ Prefal	bricated Ho	me		
Estimated construction This considered the sta	andard of fitout and	d finish, incl	uding quality of a	appliances, floor	
☐ Basic	☐ Medium		High	☐ Prestige	
c) Number of rooms:					
Bedrooms:					
Bathrooms:	-				
Kitchens:					
Loungerooms:					
Dining Rooms:	-				
Laundries:	-				
Garages:	-				
Car spaces/ undercov	er parking:				
Covered pergola:	□ Yes [□ No			



Ot	Other Rooms (please specify in detail):							
d) Hydraulic services (Plumbing, Draining and Gas Fitting):								
Но	ot Water service:	☐ Gas	☐ Electi	ric	☐ Solar			
Pu	ımps:	□ Yes	\square No					
	yes, ımber of pumps:							
Ra	inwater tanks:	□ Yes	□ No					
Ify	yes, material of tank: _							
Du	ucted Gas Heating:	☐ Yes	□ No					
e) Air Cond	ditioning:							
Du	ucted Air Conditioning	:		\square Yes	[□ No		
Sp	lit System Air Conditio	oning:		\square Yes	[□ No		
Ify	If yes, number of systems:							
Ro	Room/window mounted Air Conditioning Units: ☐ Yes ☐ No							
Ify	If yes, number of systems:							
f) Electrica	al services:							
Int	tercom:		\square Yes		□ No			
Ify	yes, type of intercom:	☐ Audi	o	□ Vide)			
Du	ucted Vacuum System	1	☐ Yes		□ No			
Bu	irglar Alarm/ Security	System:	☐ Yes		□ No			
Ac	ccess Control Systems:		☐ Yes		□ No			
CC	CTV Systems:		☐ Yes		□ No			
Te	levision Antenna – fre	estanding:	☐ Yes		□ No			
Се	eiling Fans:		☐ Yes		□ No			
If y	yes, number of ceiling	fans:						



g) Fire	Services:				
	Hydrant Booster Pump:		☐ Yes	\square No	
	Fire Alarm – Bell:		□ Yes	\square No	
	Fire Indicator Panel:		□ Yes	□ No	
	Emergency Warden Interco	om Speakers:	□ Yes	□ No	
	Fire hose Reel and Nozzles:	:	□ Yes	□ No	
	Fire Alarm – Heat/smoke		□ Yes	□ No	
	Detectors:		□ Yes	\square No	
	Fire extinguishers:		□ Yes	□ No	
h) Kitcl	nen Appliances:				
	Type of benchtop:				
	☐ Granite ☐ F	Reconstitute	d Stone	\square Laminate	
	☐ Timber ☐ 0	Other – pleas	se specify:		
	Cooktop:		☐ Yes	\square No	
	If yes, type of cooktop: $\ \Box$	Gas	☐ Electric	☐ Ceramic	\square Induction
	Underbench/wall oven:		☐ Yes	\square No	
	Upright Stove:		☐ Yes	\square No	
	Rangehood:		□ Yes	\square No	
	Dishwasher:		□ Yes	\square No	
	Electric Water Filter:		□ Yes	\square No	
	Garbage Disposal Unit (Insi	inkerator):	□ Yes	\square No	
	Comments:				
i) Bedr	ooms:				
	Built in wardrobes:		☐ Yes	\square No	
	Comments:				



j) Bathroom/Ensuite Assets:

	Freestanding accessories: Includes shower caddies, soap	\Box Yes p holders, toilet brushes)	□No
	Shower Curtains:	☐ Yes	□ No
	Exhaust Fans:	☐ Yes	□ No
	Spa Bath:	☐ Yes	□ No
	Heated Towel Rack:	☐ Yes	□ No
	Comments:		
k) Laun	dry assets:		
	Washing Machine:	☐ Yes	\square No
	Electric Clothes Dryer:	☐ Yes	\square No
l) Floor	Finishes:		
	Carpet:	☐ Yes	\square No
	If yes, specify which rooms: _		
	Vinyl:	☐ Yes	\square No
	If yes, specify which rooms: _		
	Prefinished/floating timber f	floors: Yes	□ No
	If yes, specify which rooms: _		
	Tiles:	☐ Yes	□ No
	If yes, specify which rooms: _		
	Polished Timber:	☐ Yes	□ No
	If yes, specify which rooms: _		
	Other:	☐ Yes	□ No
	If yes, specify which rooms, a	nd what material:	





m) Window Coverings:

Blinds	:	\square Yes		\square No			
Type:	☐ Fabric Vertion	cals	□ Met	al Venet	ians	☐ Timbe	er Verticals
	☐ Block out Sc	reens	□ Roll	er Blinds	s	☐ Other	(detail below
Specify	y which rooms ha	ve blind	s:				
Curtai	ns:	☐ Yes		□ No			
Type:	☐ Lace	☐ Pren	nade Cu	rtains	☐ Custo	om Made	Curtains
Specify	y which rooms ha	ive curta	ins:				
) External Eq	uipment:						
	s Court: material on cour	t:		□ Yes		□ No	
If yes,	ming pool: method of heatin			□ Yes		□ No	
Sauna	over: □ Yes		□ No	☐ Yes		□ No	
	non BBQ Area:			□ Yes		□ No	
	rised Pergola Lou	vres:		□ Yes		□ No	
	rised Window Sh			☐ Yes	1	□ No	
Solar (Garden Lights:			☐ Yes	I	□ No	
Free-s	tanding shed:			□ Yes	1	□ No	
If yes,	approximate size	2:		m²			
Motor	rised garage dooi	r/boom {	gate:	☐ Yes	ļ	□ No	
Autom	natic irrigation sy	stem:		\square Yes	1	□ No	
If yes,	Panels: approximate size ation costs after I		 \$	□ Yes		□ No	
	rea Property:		T		•		
Gym:	. ,			☐ Yes	[□ No	
-	number of cardi	ovascula	r equipr	ment: _			
	Number of resi	istance e	quipme	nt: _			
Elevat	ors:			□ Yes	1	□ No	
Garha	ge Chute:			□ VΔ ¢	1	□No	



5. Authorisation:

Should you wish to proceed, please sign below to confirm:

I/We the undersigned hereby accept terms and conditions as listed on http://www.corpred.com.au/bronze/terms-of-use-agreement/ and authorise Corpred Enterprises Pty Ltd to create a depreciation estimate on my property for FREE.

Sign here:		Date://
If vou are comp	letina the forms on a computer, you may prir	nt vour name instead of sianina.

5. Submitting your forms:

Upon receipt of your forms, an SMS will be sent to you within approximate one business day containing your estimate of your first full year of depreciation.

Please complete the above form and forward to our Head Office via:

EMAIL:

info@corpred.com.au

POST:

Corpred Enterprises PO Box 255 Hurstville NSW 1481

OFFICE LOCATIONS:

Level 13, 135 King Street, Sydney NSW 2000

Ground floor, 430 Little Collins Street, Melbourne VIC 3000

Level 10, 15 Green Square Close, Fortitude Valley QLD 4006

Level 3, 169 Fullarton Road, Dulwich SA 5065

The Garden Office Park, Level 2 Building C, 355 Scarborough Beach Road, Osborne Park WA 6017