

# MOTOR VEHICLE TAX RETURN INFORMATION

Please review the information below and contact our office if you need assistance.

**Business Name:** \_\_\_\_\_

**Contact Name & Number:** \_\_\_\_\_

Car Details	
Vehicle Make & Model	
Registration Number	
Legal Owner	
Date Purchased	
Purchase Price	
Purchased on cash/finance?	
Travel	
Do you keep a log book?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Time period of the log book	
Regular Driver	
Total Klm's travelled in the financial year	
Business Klm's in the log book period (1)	
Total Klm in the log book period (2)	
Business Use % (1/2)	
Running Costs	Total
Fuel	
Registration	
Insurance	
Repairs & maintenance	
Interest expense	
Lease payments (please provide a copy of the contract)	
Parking, tolls, roadside assistance	