

Financial Statements Questionnaire – Date: _____

Ensure this questionnaire is completed and included with your records

Client Name		Phone:	
Balance Date		Email:	

To: CooperAitken Ltd

Terms of Engagement

I/We hereby instruct you and your and staff/contractors as applicable to prepare my/our Financial Statements and Taxation Returns for the year/period ending _____. 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. I/We understand that you will rely upon the information provided by me/us. Your services are not intended to, and accordingly will not result in the expression by you of an opinion on the Financial Statements in so far as third parties are concerned, or in the fulfilling of any statutory audit requirements. I/We understand that during preparation of the Financial Statements and Taxation Returns you will not be specifically investigating non-compliance with laws and regulations – however, should anything come to light of this nature during this process, you will bring that to my/our attention.

I/We understand that the Financial Statements and Taxation Returns are prepared for my/our own use and to determine my/our taxation liabilities. If this should change in any material respect, I/we will inform you immediately. You will not accept any responsibility to any person, other than me/us, for the contents of the Financial Statements.

All other terms and conditions of this engagement are the same as those referred to in the original Engagement Letter I/we signed when I/we became a client.

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.

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 have also instructed you to prepare our GST Returns on a regular basis. I/We accept that it is my/our responsibility to advise you of all relevant transactions on a timely basis as well as obtain valid tax invoices that comply with the GST legislation.

I/We give authority for any refund credits to be transferred to your 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.

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

Convenient time to call you is:	
Alternative phone numbers are:	
When do you want your accounts completed by?	
Would you like us to supply a copy to your bank?	Yes <input type="checkbox"/> No <input type="checkbox"/> (Tick One)
If your accounts are to be supplied to your bank, please advise the name of your current bank manager:	

Legal and Loan Documents		
Please attach any solicitor's statements and Sale and Purchase Agreements relating to any legal transactions during the year. Please also include Statements and Agreements relating to any mortgages, hire purchase, leases or loans. Please include a copy of your latest Rateable Valuation for any properties you own.	<input type="checkbox"/>	
Business Expenses		
There are a number of invoices that we specifically require. Please ensure the records you provide us with include all paid accounts for:		
<ul style="list-style-type: none"> ▪ Insurance premiums ▪ Legal fees ▪ ACC payments and arrangements 	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
Farm House Expense Apportionment (including any attached garage / storage space)		
Please provide the following details:	<input type="checkbox"/>	
Area of house (msq / sqft)		_____
Area dedicated for business purpose (msq / sqft)		_____
Area of house with mixed use – used for both business and private purpose (msq / sqft)		_____ %
Time of mixed use area used for business purpose %		_____ %
Livestock on Hand – see attached Schedule 3, Client Questionnaire Livestock Sheet		
A schedule has been enclosed. Please complete and attach.	<input type="checkbox"/>	
If applicable a copy of last year's Livestock Schedule is enclosed for your information.	<input type="checkbox"/>	

Motor Vehicles		
The proportion of motor vehicle business use as established by your vehicle log book(s) is/are:		<input type="checkbox"/>
Vehicle Description _____	Vehicle Description _____	
Business _____ km	Business _____ km	
Total _____ km	Total _____ km	
Percentage Business _____ %	Percentage Business _____ %	
<ul style="list-style-type: none"> ▪ Please note that a detailed and accurate log book must be completed for a three month period every three years or vehicle expense claims will be limited to a maximum of 25% of expenses incurred. ▪ If you are operating as a Company, please indicate which vehicles you are currently paying Fringe Benefit tax for: _____ _____ 		
Mixed Use Holiday Home		
Does this entity have a property (such as a holiday home or a bach) that is used privately and also to derive income?		<input type="checkbox"/>
If yes, provide details of property: _____ _____		
Was the property empty for 62 days or more in the income year?		<input type="checkbox"/>
If yes, please complete the following section so we can determine the amount 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* during the income year OR where income from any person received was less than 80% of market rate _____		
<small>* Associated persons include close relatives, or if owned by an entity, persons associated with the entity owning the property</small>		
If there is more than one tenant who used the property through the year, please attach details.		<input type="checkbox"/>
Name of tenant: _____		
Relationship to owner (if any): _____		
Amount of rent they paid: \$ _____		
Dates rented (From: To) _____		
Expenses incurred in respect of the property (the list below is not exhaustive – details of all expenses will be required):		<input type="checkbox"/>
Cost of advertising for tenants	\$ _____	
Cost of repairing damages caused by tenants	\$ _____	
Number of days spent in the property while repairing damages caused by tenants	_____	
Mortgage interest	\$ _____	
Rates	\$ _____	
Insurance	\$ _____	
Repairs/maintenance for general wear and tear	\$ _____	
Other (please give details) : _____		

