

Individual Questionnaire – 31st March 2018

Please ensure this questionnaire is completed and included with your records

Name: Address:	Phone: Mobile	
Balance Date:	Fax:	
	Email:	

Dear Valued Client

This questionnaire provides us with the information necessary to complete your tax return. It is therefore important **that all the questions below are answered** and the **information given is complete and accurate**. This will ensure we can maximise your tax claims and minimise your tax payments. If any section is not applicable, please put a line through the box.

To: Alliot BW Limited
PO Box 99841
Newmarket
AUCKLAND 1149
Email: Philippa.m@alliotbw.co.nz

Terms of Engagement

We hereby instruct you to prepare my/our Financial Statements and Taxation Returns for the year/period ending 31 March 2018. 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.

I/We do not want you to undertake a detailed review of my affairs in order to substantiate the accuracy of the information, and accept you are unable to provide assurance on the Financial Statements.

I/We understand that a compilation agreement cannot be relied on to detect error and fraud.

I/We understand that the Financial Statements and Taxation Returns are prepared for my/our own use and to determine my/our income tax 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 will be set out in a more detailed Engagement Letter when we commence preparing your financial statements and tax returns.

You are hereby authorised to communicate with my/our bankers, solicitors, finance companies and all government agencies to obtain such information as you require in order to complete the above assignments.

Further, we authorise you in the course of preparing our financial statements to allow Alliot BW Ltd staff and other persons contacted to Alliot BW Ltd access to our information.

You are to represent me/us as my/our tax agent. You are therefore authorised to sign any taxation return on behalf of myself/ourselves or any of my/our associated entities.

I/We understand that if fees are charged on a monthly basis payment will be due by the 20th of the month following. Should any invoices remain unpaid after the invoice due date, interest of 1.5% per month of the unpaid amount will be added onto my/our account.

Signature _____

Date _____

Records Required	✓	Comments
Wages/National Superannuation/Benefits		
Please provide us with the names of any organisations you have received the following from: <ul style="list-style-type: none"> ▪ Wages ▪ ACC Payments ▪ National Superannuation ▪ Any other benefits In most cases IRD will have sent us these details direct, however we do need to check all details have been included.	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
Interest and Dividends		
Please supply the advice slips. <ul style="list-style-type: none"> ▪ For interest received, you should have an annual advice notice showing the withholding tax deducted. This may be on the bottom of your Bank Statement dated 31 March. ▪ If any dividends are taken as bonus shares, also include these advice slips. 	<input type="checkbox"/> <input type="checkbox"/>	
Rental and Leased Property		
Please attach full details of the address of the property, rent received, number of months let or available to let and any expenses incurred (bank fees, insurance, interest, legal fees, rates, repairs and maintenance).	<input type="checkbox"/>	
Partnerships, Trusts, Estates and Companies		
Please supply details of income received.	<input type="checkbox"/>	
Overseas		
Include overseas interest, dividends, wages received and taxation paid. Note: New Zealand residents are liable for tax on all world-wide income.	<input type="checkbox"/>	
Records Required		
Any Other Income		
Attach details <ul style="list-style-type: none"> ▪ Please provide details of income insurance claims (e.g. income protection insurance claim). ▪ Royalties ▪ Others 	<input type="checkbox"/>	
Deductible Expenses		
Please attach details of expenses incurred in earning income (eg commissions, income protection insurance, interest on loans used to acquire investments etc)	<input type="checkbox"/>	
LAQC		
<ul style="list-style-type: none"> ▪ Loss Attributing Qualifying Company – if you have been allocated a share of a loss other than from a company that we are aware of, please provide details 		
Donations, Housekeeping and Childcare Tax Rebates		
Please attach your receipts to this questionnaire.	<input type="checkbox"/>	
Required disclosure of interest in a foreign company, unit trust, superannuation scheme or life policy		
If you hold rights or an interest/shares in any of the above foreign entities at any time during the year, the following information is required: <ul style="list-style-type: none"> ▪ Name of foreign fund ▪ Country of residence ▪ Nature of interest held (eg shares, units, superannuation, insurance) ▪ Date interest acquired ▪ Interests held by relatives and associated persons 	<input type="checkbox"/>	

Working for Families Tax Credits

Please supply full names and birth dates of all dependant children. Please note the following:

- If you had a child born within the current financial year you may be eligible for the Parental Tax Credit. Please include a copy of the child's birth certificate or their IRD Number.
- Where a child has become financially independent during the current financial year, please advise the date they left school or home.

If you have working for families tax credits during the year, please supply the certificate issued to you by IRD, detailing the amounts.

Also provide details of any child support or maintenance payments made or received.

Child's Name

IRD No.

Date of Birth

Date left School

_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

**Thank you for completing this questionnaire
Please remember to sign front page**