

Financial Statements Questionnaire – 2022/2023

Ensure this questionnaire is completed and included with your records

Client Name		Phone:	
Balance Date		Email:	

To:

Terms of Engagement

I/We hereby instruct you DPA Limited and staff/contractors as applicable to prepare my/our Financial Statements and Taxation Returns for the year/period ending 31 March 2023. 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 give authority for any refund credits to be transferred to DPA Limited's 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.

Signature of Authorised Party

Date

Signature of Authorised Party

Date

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:	
Has the nature of your business changed in any way during the past 12 months? If yes, please provide brief details: <hr/> <hr/> <hr/> <hr/> <hr/>	

Have you received Covid-19 Short-Term Absence Payments? (please note all dates and receipts)

Date rec: ___/___/___ \$ _____

Date rec: ___/___/___ \$ _____

Date rec: ___/___/___ \$ _____

Where Covid-19 Short-Term Absence Payments have been received for stakeholders (shareholders/partners/trustees/beneficiaries/owners) of the business please provide details of the following:

- Amounts received for each stakeholder
- Whether amounts received were for full-time or part-times

Have you received Resurgence Support Payments? (please note all dates and receipts)

Date rec: ___/___/___ \$ _____

Date rec: ___/___/___ \$ _____

Date rec: ___/___/___ \$ _____

Have you received a Covid-19 Cultural Sector Emergency Relief Grant or other Covid-19 support payments?

Please provide details if it is an "other" Covid-19 support payment

Date rec: ___/___/___ \$ _____

Date rec: ___/___/___ \$ _____

Have you received the Covid-19 Small Business Loan?

Date rec: ___/___/___ \$ _____

Have any amounts of Covid-19 support payments been repaid back?

Please provide details of payment and reason for repayment

Date paid back: ___/___/___ \$ _____ Reason: _____

Fringe Benefit Tax (FBT) Returns

Supply copies of Fringe Benefit Tax (FBT) returns and work papers.

Goods & Services Tax (GST) Returns

Please supply copies of Goods & Services Tax (GST) returns and work papers if not filed via Xero.

Interest and Dividend Certificates

Supply copies of certificates.

Lease details

Supply copies of lease agreements for non-building assets (e.g. motor vehicles, equipment).

Foreign Income

Details of any foreign income received, and any tax deducted from this.

Accounts Receivable (Debtors) – see attached Schedule 1

All accounts or amounts owing to you at balance date should be scheduled. **Exclude** any bad debts. To enable bad debts to be excluded from income, these must be written off prior to balance date.

Total at Balance Date:

\$ _____

GST Included **Excluded**

Livestock on Hand – see attached Schedule 3, Client Questionnaire Livestock Sheet

A schedule has been enclosed. Please complete and attach.
 If applicable a copy of last year's Livestock Schedule is enclosed for your information.

Consumables on Hand

If the value of total unused consumables on hand at balance date exceeds \$58,000, please provide full details. This threshold is for the combined value, not the individual values. Examples include fencing materials, ear tags, dips, drenches, animal health remedies, fertiliser, purchased supplementary feed, petrol, diesel, oil, twine, alkathene pipe etc. Please note, that this does not include home grown hay/silage and only includes purchased feed costs.

Please estimate the cost (Excluding GST) of consumables on hand

\$

Petrol, Diesel & Oil

Fencing Materials

Water Piping & other items held for water system repairs

Dairy Shed Supplies (Cleaning Products, Teat Spray etc)

Shearing Shed Supplies

Animal Health Products (e.g. drench, dip, mastitis treatment products)

Other farm stores

Fertiliser

Purchased Stock Feed (at cost):

Hay

Silage

Maize Silage

Grain

Palm Kernel

Other

Total Cost

Unsold Produce

Please provide full details of any produce on hand at balance date that is intended for sale. Examples include honey, wool, timber, hay, silage, crops.

Category

Quantity

**Estimated Value
(Excl GST)**

Wool _____ kg

Timber _____

Hay _____ Tonnes dry matter

Silage _____ Tonnes dry matter

Grain _____ Tonnes

Honey _____ kg

Firewood _____

Other Produce, Harvested Crops & Fruit

Total Value

Private Use		
Value of goods taken for private use at their cost price (excluding livestock).	<input type="checkbox"/>	\$ _____
Goods taken for own use	<input type="checkbox"/>	GST Included <input type="checkbox"/> Excluded <input type="checkbox"/>
Quantity		
Sheep _____		
Cattle _____		
Pigs _____		
Milk _____		
Other _____		
Expenses paid in Cash or from Personal Funds		
Please provide a list if applicable.	<input type="checkbox"/>	
How many meals have you provided to contractors? (morning / afternoon tea = 1/2)	<input type="checkbox"/>	Quantity _____
Residential Land Withholding Tax		
Have you sold residential property in New Zealand where Residential Land Withholding Tax has been deducted and paid to the IRD? If so, provide details e.g. IR1100 Residential land withholding tax return and other sale and purchase documents.	<input type="checkbox"/>	
Residential Property Sales		
Have you sold any residential property during the year (not otherwise detailed on the information provided)?	<input type="checkbox"/>	
If yes, when was the property purchased?		_____
If it was purchased with 10 years of the sale date,		
<ul style="list-style-type: none"> what was the original purchase price 		\$ _____
<ul style="list-style-type: none"> and the sale price? 		\$ _____
Mortgage Interest Paid on Residential Properties		
Have you incurred interest on residential properties owned (which is not your main family home or a 'new build*')? Is the interest also against properties other than residential rentals? If so, please provide details of amount of interest and dates paid.	<input type="checkbox"/>	
* A new build is a self-contained residence that receives a Code Compliance Certificate confirming the residence was added to the land on or after 27 March 2020		
Research and Development		
Have you spent an amount on research and development during the income year? If so, provide ledger accounts and details of expenditure	<input type="checkbox"/>	

Motor Vehicles

The proportion of motor vehicle business use as established by your vehicle log book(s) is/are:

Vehicle Description: _____

Business _____ km
Total _____ km
Percentage Business _____ %

Vehicle Description: _____

Business _____ km
Total _____ km
Percentage Business _____ %

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?

Yes No

If yes, provide details of property: _____ -

Was the property empty for 62 days or more in the income year? Yes No

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 _____

* Associated persons include close relatives, or if owned by an entity, persons associated with the entity owning the property

If there is more than one tenant who used the property through the year, please attach details.

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):

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) : _____

Mixed Use Boat or Plane

Does this entity have a boat or plane (with a market value of \$50,000 or greater), that is used privately and also to derive income? Yes No

If Yes, provide details:

Description: _____

Market value: \$ _____

Was the asset unused for 62 days or more in the income year? Yes No

If yes, please complete the following section so we can determine the amount of allowable deductions.

Mixed Use Boat or Plane – Information Required

The number of days the asset was **unused** 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 _____

* Associated persons include close relatives, or if owned by an entity, persons associated with the entity owning the property

For non-associated persons where payment received is at least 80% of market value:

Number of days the asset was used: _____

Income received: \$ _____

Expenses incurred in respect of the property (the list below is not exhaustive – details of all expenses will be required):

Cost of advertising for hireage \$ _____

Cost of repairing damages caused by hireage \$ _____

Operating costs / supplies \$ _____

Insurance \$ _____

Repairs/maintenance for general wear and tear \$ _____

Other (please give details) _____

Cryptoassets

Have you received or traded in cryptoassets during the income year? If so, please provide the following information:

- The type of cryptoasset
- For each transaction provide the date, type of transaction i.e. received or disposed of, number of units, value in NZD
- Total units of each cryptoasset held at the beginning and end of the year
- Exchange records and bank statements
- Wallet addresses

Thank you for completing this questionnaire - don't forget to sign it

Schedule 3 – Livestock

Do not print this page

Print as applicable, either:

Client Questionnaire Livestock Numbers

Client Questionnaire Livestock Sheet