

Financial Statements - 2021 Trust Questionnaire



Ensure this questionnaire is completed and included with your records.

Neovia Ref: _____

Client Name:			
Balance Date:		Phone:	
Email:		Cellphone:	
Physical Address:			
Postal Address:			

To: Neovia Advisory Limited.

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 carry out the preparation of my/our financial statements and tax returns.

I/We authorise you to act as my/our Agent for Inland Revenue Department matters, and to obtain information from Inland Revenue about all tax types. This includes information through all Inland Revenue media and communication channels.

Signature _____

Date _____

Records Required (For 12 months to Balance Date)		Comments
Gifting		
Please provide details of any gifting done through the financial year. This includes the following: <ul style="list-style-type: none"> • Copy of Deed of Acknowledgement of Debt • Copy of Deed of Forgiveness of Debt These are prepared by either your solicitor or by Taurus Trustee Services Limited.	<input type="checkbox"/> <input type="checkbox"/>	Solicitor Name _____
Interest Received		
An RWT Deduction Certificate (IR15) will be sent to you by your bank or other financial institutions, indicating the amount of tax deducted from interest earned.	<input type="checkbox"/>	
Dividends Received		
A dividend payment advice will accompany dividend cheques indicating withholding tax deductions or imputation credits.	<input type="checkbox"/>	
Other Income & Expenses		
Rents Received Please complete the Rental Questionnaire.	<input type="checkbox"/>	

<p>Business Income Please complete Business Questionnaire.</p> <p>Overseas Investments Details of all foreign investments and income.</p>	<input type="checkbox"/> <input type="checkbox"/>	
Accounts Receivable (Debtors) - See attached Schedule 2		
<p>All accounts or amounts owing to you at balance date should be scheduled.</p>	<input type="checkbox"/>	
Accounts Payable (Creditors) - See attached Schedule 2		
<p>All accounts or amounts owing by you at balance date should be scheduled.</p>	<input type="checkbox"/>	
Other Information		
<p>Details of anything else we should be aware of in relation to the preparation of your accounts.</p>		

**Thank you for completing this questionnaire
Don't forget to sign it on page 1.**

