

Financial Statements Questionnaire – 31 March 2025

Ensure this questionnaire is completed and included with your records

Client Name		Phone:	
Balance Date	31 March 2025	Fax:	
		Email:	

To: HSW Limited

Terms of Engagement

I/We hereby instruct you to prepare my/our Financial Statements and Taxation Returns for the year/period ending 31 March 2025. 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.

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.

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 _____

Date _____

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: _____ _____ _____ _____ _____	

Motor Vehicles	Home Office Expenses																																						
<p>The proportion of motor vehicle business use as established by your vehicle log book(s) is/are:</p> <p>Vehicle Description: _____</p> <p>Vehicle CC: _____</p> <table style="width: 100%; margin-top: 10px;"> <tr> <td style="width: 20%;">Business</td> <td style="width: 20%;">_____</td> <td style="width: 20%;">km</td> <td style="width: 40%;"></td> </tr> <tr> <td>Total</td> <td>_____</td> <td>km</td> <td></td> </tr> <tr> <td>Percentage Business</td> <td>_____</td> <td>%</td> <td></td> </tr> </table> <p>Vehicle Description: _____</p> <p>Vehicle CC: _____</p> <table style="width: 100%; margin-top: 10px;"> <tr> <td style="width: 20%;">Business</td> <td style="width: 20%;">_____</td> <td style="width: 20%;">km</td> <td style="width: 40%;"></td> </tr> <tr> <td>Total</td> <td>_____</td> <td>km</td> <td></td> </tr> <tr> <td>Percentage Business</td> <td>_____</td> <td>%</td> <td></td> </tr> </table> <p>Please note that the mileage calculation has changed from the 2018 tax year, mileage is now calculated using both business kilometres travelled and total kilometres travelled.</p> <p>Please ensure that kilometres travelled (both business and private) is included as well as the cc of the vehicle.</p> <p>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.</p> <p>If you are operating as a Company, please indicate which vehicles you are currently paying Fringe Benefit tax for:</p> <p>_____</p> <p>_____</p>	Business	_____	km		Total	_____	km		Percentage Business	_____	%		Business	_____	km		Total	_____	km		Percentage Business	_____	%		<p>If part of your home is set aside principally for use as an office/workshop/storage area, please provide the following details:</p> <p>Area used for Business: _____ m²</p> <p>Total Area of House & Workshop: _____ m²</p> <table style="width: 100%; margin-top: 10px;"> <tr> <td style="width: 80%;">Power</td> <td style="width: 20%;">\$ _____</td> </tr> <tr> <td>Insurance (Building & Contents)</td> <td>\$ _____</td> </tr> <tr> <td>Interest (House Mortgage)</td> <td>\$ _____</td> </tr> <tr> <td>Rates (including regional council rates)</td> <td>\$ _____</td> </tr> <tr> <td>Repairs & Maintenance</td> <td>\$ _____</td> </tr> <tr> <td>Other</td> <td>\$ _____</td> </tr> <tr> <td>Total</td> <td>\$ _____</td> </tr> </table> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>	Power	\$ _____	Insurance (Building & Contents)	\$ _____	Interest (House Mortgage)	\$ _____	Rates (including regional council rates)	\$ _____	Repairs & Maintenance	\$ _____	Other	\$ _____	Total	\$ _____
Business	_____	km																																					
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Other	\$ _____																																						
Total	\$ _____																																						

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?		
If yes, provide details of property: _____		Yes <input type="checkbox"/> No <input type="checkbox"/>
Was the property empty for 62 days in the income year?		Yes <input type="checkbox"/> No <input type="checkbox"/>
If yes, please complete the following section so we can determine the amount of allowable deductions.		<input type="checkbox"/>
<u>Mixed Use Holiday Home – Information Required</u>		
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):		

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 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)

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

Schedule 1 – Accounts Receivable (Debtors)

Amounts owing to you at 31 March 2025

Client Name	
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[illegible]

Totals	
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Schedule 2 – Accounts Payable (Creditors)
Amounts owing by you at 31 March 2025

Client Name	
-------------	--

Name of Creditor	Description of Goods	Code	Total Incl GST

Totals	
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GOVERNMENT SUBSIDY

Date Claimed: _____	Date Claimed: _____	Date Claimed: _____
Amount: _____	Amount: _____	Amount: _____