

OLIVE

ACCOUNTING & BOOKKEEPING

New Client Questionnaire

Date:

Welcome to Olive Accounting & Bookkeeping! Please take the time to fill in your details below and sign the bottom section once you are happy for us to act as your Tax Agent.

Individual 1

First Name:	Middle Name:	Last Name:
Occupation:	IRD Number:	Email:
Best Contact No:	Date of Birth:	Place of Birth:
Home Address:		
Postal Address:		

Individual 2

First Name:	Middle Name:	Last Name:
Occupation:	IRD Number:	Email:
Best Contact No:	Date of Birth:	Place of Birth:
Home Address:		
Postal Address:		

If you are currently operating any of the entities below, please mark as indicated and fill out details for the applicable entities:

Company

Trust

Partnership

Sole Trader

Limited Company / LTC

Company Name:

Nature of Business:

Registered Office Address:

IRD Number:

Company Key:

Director 1:

Director 2:

Shareholder 1:

Shareholder 2:

What tax types are you registered for? GST

FBT

PAYE

Trust

Trust Name:

Nature of Business:

IRD Number:

Trustee 1:

Trustee 2:

Copy of Trust Deed attached?

What tax types are you registered for? GST

PAYE

Partnership

Partnership Name:

Nature of Business:

IRD Number:

Partner 1:

Partner 2:

What tax types are you registered for? GST PAYE

Previous Accountant

If you are coming to us from a previous accountant, please provide details below:

Business Name:

Contact Person:

Phone Number:

Email Address:

Please provide copies of your most recent financial statements and tax returns for all entities.

Full Name:

Full Name:

Signature:

Signature:

Date:

Date:

We look forward to working with you!

Team Olive

Office Use

Olive to do Annual Accts?	Olive to do GST/PAYE/FBT?	Details changed at Coys House
Pro Clearance Letter Y N	How did they hear about Olive?	
To be GST Registered Y N	GST Start Date:	FY for Olive to start:
AP Set up? Y N	AP Start Date:	AP Amount: