Client Name:



2024 Individual Questionnaire

Please complete this questionnaire sign over the page and return with your records

Information we need	<u> </u>	Y/N/NA	Comment
		1/IV/IVA	Comment
Wages/NationalSuperannuation/Schedular Payments/Bind you receive any wages, salary, WINZ payments or schedular Payments Payments (No. 1974).			
Interest and Dividends Did you receive income from interest or dividends, includi If so, please include statements.	ng PIE distributions?		
Overseas Income – interest, dividends, wages received Did you receive income from overseas? Did you receive any foreign superannuation payment If so, please include statements.	ts?		
 Other Income Have you been allocated a share of profit/loss from a complete the work for? Did you receive income from a rental property? Did you receive income from a bach/holiday home? Did you receive income from any source from which rededucted? If so, please supply details. 			
 Any Other Information Do you have an Income Replacement Insurance Policy If so, provide copies of policy, details of premiums and Do you have any expenses to claim? Have you sold a residential property? If so, please provide details. Donations/Tax Rebates Did you make any donations to charities or schools? If so, please provide approved donation receipts 			Attach Receipts
Other relevant information Is there any other information that you consider relevant If so, please provide details.	to the preparation of your 2024	Income Tax R	eturn?
Working for Families Tax Credits and Parental Tax Credits Please complete for all your dependent children:			
Child's Full Name: IRD No.	Date of Birth	Da	te left School (If applicable)
Please also provide:			
Details of any child support or maintenance payments	s made or received		
Other payments received by family members exceeding the second seco			
Any income received by your children			
 Income/Drawings/Distributions received from a trust, paid by the Trust 	including any school fees		
Any other monies received e.g. loans/gifts from family	y Companies or Trusts		

FROM: Client Name_____



Terms of Engagement

I/We hereby instruct ROVA to prepare my Financial Statements and Taxation Returns for the 2024 Financial year.

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 ROVA will rely upon the information provided by me/us. ROVA's services are not intended to, and accordingly will not result in the expression by ROVA 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 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 ROVA 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 Engagement Letter I/We have signed. ROVA's Terms of Engagement are also available on the website https://www.rova.co.nz/about/terms-of-engagement/

If I/We have also instructed ROVA to prepare our GST/PAYE/FBT Returns or prepare wages on a regular basis. I/We accept that it is my/our responsibility to advise ROVA of all relevant transactions on a timely basis as well as obtain valid tax invoices that comply with the GST legislation.

ROVA are to represent me/us as my/our tax agent. All income tax returns will be signed by me/us however ROVA are authorised to sign any other taxation return on behalf of myself/ourselves or any of my/our associated entities.

Please note: - Privacy and AML Due Diligence Requirement

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

Signed		Date	
	Current Address		
	Email		
Please complete the details to the right so that we can update our records.	Mobile		
	Work phone		

Thank you for completing this questionnaire.

We must have client questionnaires signed before we can start your end of year accounting work.