

**NEW LIMITED COMPANY CLIENT INFORMATION**

**COMPANY DETAILS**

Name of Company:

Date of Formation:

Company Address:

Business Telephone Number: Business Fax number:

Company Reg Number: Company UTR:

Business Website: ………………………………. Business E-mail:

VAT Registration Number: ………………………....... VAT Quarter ending:

PAYE Accounts Office Reference: ……………………………… PAYE Registration Number:

**DIRECTOR 1 DETAILS**

Full Name:

Home Address:

Date of birth:

National Insurance Number:

Unique Tax Reference Number:

Home Telephone Number:

Personal Telephone Number:

Personal Email Address:

**DIRECTOR 2 DETAILS**

Full Name:

Home Address:

Date of birth:

National Insurance Number:

Unique Tax Reference Number:

Home Telephone Number:

Personal Telephone Number:

Personal Email Address:

**DIRECTOR 3 DETAILS**

Full Name:

Home Address:

Date of birth:

National Insurance Number:

Unique Tax Reference Number:

Home Telephone Number:

Personal Telephone Number:

Personal Email Address:

**SHAREHOLDER DETAILS**

Authorised Share Capital:

Issued Share Capital:

Shareholder 1:

Shareholder 2:

Shareholder 3:

Number of Shares Shareholder 1:

Number of Shares Shareholder 2:

Number of Shares Shareholder 3:

**SERVICES REQUIRED**

YES NO

Accounts Preparation:

Company Tax Return:

Personal Tax return:

PIID’s:

Payroll:

VAT Return preparation:

Bookkeeping:

Others:

**CLIENT SELF ASSESSMENT TAX RETURN QUESTIONNAIRE**

Please complete and return as soon as possible in accordance with our agreed deadline to enable us to prepare your self-assessment tax return.

Please provide any supporting documentation as appropriate and simply add N/A to a section of the questionnaire if it does not apply to you.

**INCOME**

Please provide information that relates to the tax year period **6th April to 5th April**  if you have received personal income from the following sources:

**Employment Income**

Name of Employer

Address of Employer

e.g. 123/AZ4687

PAYE Reference

Income per P60/P45

Tax per P60/P45

Health Insurance

Company Car Benefit

Other Benefits

Please provide the name and address of your employer as well as their PAYE reference.

Please provide details from P60s or P45s, recording your salary and the tax deducted. Your benefits and expenses details ( such as health insurance etc) can be found on the form P11D.

**Student Loans**

Please note Student Loans are repayable once total income including dividends exceeds £21,000 (2017-2018 rates)

**Details of outstanding loan?**

**Social Security Income**

Please supply details of income such as jobseekers allowance / maternity allowance received directly from social security.

**Type Amount Received**

£

**Dividends**

Please supply details of any dividend income received.

|  |  |  |
| --- | --- | --- |
|  | | |
|  |  |  |
| £ | £ | £ |

Name of Company

Date of Payment

Net Dividend received

**Personal Bank/Building Society Interest (received net of tax)**

Please include all personal bank account interest except interest from ISAs. If the account is held jointly, please only include your share of the interest.

|  |  |  |
| --- | --- | --- |
|  | | |
| £ | £ | £ |

Name of Bank/Society

Net Interest received

**Pension Received**

Name of Company

Reference

£

Gross Amount

£

Tax Deducted

Net Pension Received

£

**Rental Income**

Please provide details of any rents received and expenses incurred. If the property is owned jointly, please only show your share.

Name/Address of Property

Furnished/ Unfurnished Let?

Residential/ Holiday Let?

Wear & Tear Allowance?

£

Total Rent Received

Mortgage Interest

£

£

Letting Fees

£

Insurance

£

Repairs & Renewals

Other Expenses

**Capital Gains**

Please give details of any assets sold during the year. This does not include any business assets, main residence, motor vehicles, or assets with a value of less than £6000.

Description of Asset

Date of Purchase

Purchase Cost

£

Date of Sale

Proceeds of Sale

£

**Gifts Aid**

Please provide details of amounts paid to charity.

**Charity Amount Paid**

|  |  |  |
| --- | --- | --- |
|  | | |
| **£** | **£** | **£** |

**Personal Pension Payments (Payments made personally)**

Pension Provider

Contract Number

Amount Paid net by yourself

**Sole Traders**

Provide your books and records in respect of your latest year end in respect of the following self-employments

**Any Other Information**

Please advise us of any changes to your personal circumstances that relate to your tax affairs which may have not been mentioned above including foreign income/gains.