**Client Questionnaire**

We’re fully focused on ensuring that we not only meet but exceed your expectations. In order to make our meeting as productive as possible, please provide the below information about yourself and your company.

Please complete this form and email to [office@absoluteca.co.nz](mailto:office@absoluteca.co.nz)

|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Please tell us about you and your business** | | | | | | | | | | | |
| Your Full Name: | | | |  | | | | | | | |
| Your Work Phone: | | | |  | | | Your Mobile: | |  | | |
| Your Email Address: | | | |  | | | | | | | |
| Your Registered Business Name: | | | |  | | | | | | | |
| Your Business Trading Name: | | | |  | | | | | | | |
| Physical Business Address: | | | |  | | | | | | | |
| Postal Business Address: | | | |  | | | | | | | |
| Business Website Address: | | | |  | | | | | | | |
| Business Industry: | | | |  | | | | | | | |
| Job Title: | | | |  | | | | | | | |
| Personal/Family Situation: | | | |  | | | | | | | |
| Ages of Children: | | | |  | | | | | | | |
| **Type of Business:** | | | | | **Years in Business:** | | |  |  | | |
|  | Self-employed |  | Partnership | |  | Less than 1 year | |  | 7 to 10 years | | |
|  | Sole Trader |  | Company | |  | 1 to 3 years | |  | 11 years + | | |
|  | |  |  | |  | 4 to 6 years | |  |  | | |
| **Number of Employees**: | |  |  | | **Annual Turnover:** | | |  |  | | |
|  | 1 - 5 |  | 15 - 29 | |  | Less than $100,000 | |  | $400,001 to $800,000 | | |
|  | 6 - 14 |  | 30+ | |  | $100,001 to $250,000 | |  | $800,001 to $1,500,000 | | |
|  | |  |  | |  | $250,001 to $400,000 | |  | $1,500,001 + | | |
| Accounting Software: | | | | | | | | | | | |
| Registered for GST? | | | | | | GST Type: | | | | | |
| Current Accountant: | | | | | | | | | | | |
|  | | | | | | | | | | | |
| **Simply select Yes or No to the following questions** | | | | | | | | | | | |
|  | | | | | | | | | | **Yes** | **No** |
| We are aware of our expected tax obligations this financial year i.e. roughly how much we will need to pay. | | | | | | | | | |  |  |
| We have funds set aside to ensure we can and do make IRD payments on time. | | | | | | | | | |  |  |
| We have a documented business plan to ensure we are on track to achieving objectives. | | | | | | | | | |  |  |
| We are certain we are maximising every sales and revenue opportunity in our business and are driving profits as much as we can. | | | | | | | | | |  |  |
| We do regular monthly management reporting of our results. | | | | | | | | | |  |  |
| Our cash management is excellent, and we have our accounts receivable and accounts payable under control. | | | | | | | | | |  |  |
| We find we have spare time (and energy) to look objectively at our business. | | | | | | | | | |  |  |
| We find we have spare time (and energy) to enjoy life outside our business. | | | | | | | | | |  |  |
| We have protected and documented all our assets in accordance with our needs. | | | | | | | | | |  |  |
| We have a plan to exit or sell our business within a specific period. | | | | | | | | | |  |  |
|  | | | | | | | | | | | |
| **What do you want your business to look like in the next three years?** | | | | | | | | | | | |
|  | | | | | | | | | | | |
| **What are the three biggest challenges you face right now?** | | | | | | | | | | | |
|  | | | | | | | | | | | |
| **What are the biggest opportunities in your business now?** | | | | | | | | | | | |
|  | | | | | | | | | | | |
| **Is there anything else you would like to discuss at the meeting?** | | | | | | | | | | | |
|  | | | | | | | | | | | |