REFERENCE NUMBER

Ministry of Economic Development
Manatū Ōhanga
Insolvency and Trustee Service

STATEMENT OF AFFAIRS

In Liquidation
Companies Act 1993

Any personal information collected is for the purpose of administering the Liquidation in accordance with the Companies Act 1993. The information will be used and retained by the Official Assignee and will be released to other parties only with your authorisation or in compliance with statutory authorities. **You are obliged to provide this information under the Companies Act 1993.** You may have access to and request correction of any personal information included in this document.

Company Name

Trading Name

Has the company carried on business / traded in any other name?

☐ Yes ☐ No Give details

PART A – CONTACT INFORMATION

1. NAME OF PERSON COMPLETING THIS FORM

Address

Telephone

Home	Work	Fax
Mobile	Email	

Capacity in the Company

☐ Director ☐ Shareholder ☐ Manager ☐ Employee ☐ Accountant ☐ Solicitor

☐ Other

(Please give details)

2. COMPANY CONTACT DETAILS

Physical Address	Postal Address (if different)

Telephone	Mobile	Fax

Email

3. DIRECTORS CONTACT DETAILS

Director 1 Name	

Physical Address	Postal Address (if different)

Telephone	Home	Work	Fax
	Mobile	Email	

Director 2 Name	

Physical Address	Postal Address (if different)

Telephone	Home	Work	Fax
	Mobile	Email	

4. COMPANY ACCOUNTANT (IF ANY)

Firm Name		
Address		
Contact Person(s)		Phone

Previous Accountant

Firm Name		
Address		
Contact Person(s)		Phone
Date ceased acting		

5. COMPANY SOLICITOR (IF ANY)

Firm Name		
Address		
Contact Person(s)		Phone

Previous Solicitor

Firm Name		
Address		
Contact Person(s)		Phone
Date ceased acting		

PART B – BACKGROUND

6. Nature of company's business (give details)

Date started trading / / Date ceased trading / /

7a. Does / did the company rent / lease business premises?

☐ Yes ☐ No

b. Name of landlord / agent of business premises

Name	Address
Phone	

c. What date is the rent paid up to? / / What was the amount paid?

d. Is there a lease agreement? ☐ Yes ☐ No What is the term of the lease?

e. Who has the company's copy of the lease agreement?

f. Are there any subleases?

☐ Yes ☐ No Give details

g. Have any leases been assigned, surrendered or otherwise disposed of by the company before the date of liquidation?

☐ Yes ☐ No Give details

h. Are the premises protected by a security alarm?

☐ Yes ☐ No Give details

i. Who holds keys to the premises?

8. Are there ongoing contracts for which the company is receiving a service eg. security monitoring of premises?

☐ Yes ☐ No

Give details

Name of Provider	Nature of Service	Postal Address (if different)

9. Has the company ever been, or is it currently in receivership? Yes ☐ No ☐

Name of Receiver and contact details	
Appointed by	
Date appointed	
Date ceased	

10a. Is there a debenture over the assets of the company?

☐ Yes ☐ No Debenture holder

b. Have steps been taken to realise security?

☐ Yes ☐ No Give details

11. Has any person(s) involved in the management of this company been involved in another company that has been liquidated or placed in receivership?

☐ Yes ☐ No Give details

12. Has any person(s) involved in the management of this company ever been made bankrupt?

☐ Yes ☐ No Give details

13. Has any person involved in this company personally guaranteed any of the company's debts?

☐ Yes ☐ No Give details

14. When do you believe the company first became unable to pay its debts as they fell due and what made you choose this date?

15. Were creditors informed of the company's position?

☐ Yes ☐ No Give details

16. Has any of the company's property been seized in the last 6 months, eg by distress warrant or distraint?

☐ Yes ☐ No Give details

17. Has the company given away any of its property in the last two years?

☐ Yes ☐ No Give details

18. Has any person or other entity left any property or belongings in the company's care?

☐ Yes ☐ No Give details

19. Does any person or other entity have any of the company's property?

☐ Yes ☐ No Give details

20. Has the company sold any property to a director, shareholder, a relative of a director or shareholder or any entity (ie company or trust) associated with these people in the past two years?

☐ Yes ☐ No

Give details

Name of Purchaser	Item Sold	Date of Sale	Sale Price	Details of Payment

21. Is the company currently involved in any court case?

☐ Yes ☐ No

If yes, state the nature of the case, the name of the court, the name of the other party and the solicitor representing you.

22. Is the company a member of Bartercard or any similar organisation?

☐ Yes ☐ No Give details

23. Does the company have in its possession any item that is subject to Retention of Title?

☐ Yes ☐ No

Give details

Item	Location of Item	Name of Creditor	Amount Owed	Value of Item

24. Has any creditor seized items within the last 6 months pursuant to a Retention of Title claim?

☐ Yes ☐ No

Give details

Item	Location of Item	Name of Creditor	Amount Owed	Value of Item

25a. Who was responsible for completing the company's day to day accounting records?

Name	Address
Phone	

b. Where are the accounting records located?

c. What was the date of the last annual financial statement?

d. Was the company registered for GST? ☐ Yes ☐ No If registered, please provide details:

Name Registered

GST Number

Type of Registration: ☐ Invoice Basis ☐ Payment Basis ☐ Hybrid Basis

Period covered by last return

Frequency of returns ☐ 1 month ☐ 2 months ☐ 6 months

e. Were the following records kept?	Not Sure	Yes	No	Are these records computerised?	Location of records
Cash book – Cash in / Cash out					
Cheque Butts – (since commencement period)					
Deposit Butts – of last prepared accounts					
Current Cheque and Deposit Books					
Bank Statements					
Receipt Books					
Creditors Invoices					
Debtors Ledgers & Current Invoices					
Ledgers					
Journals					
Copies of Annual Financial Statements					
Hire Purchase Agreements					
Contract Papers & Other Legal Documents					
Asset Register					
Stock Sheets					
GST Records					
Wage Records					
Employment Contracts					
Constitution					
Minute Book					
Register of Shareholders					
Register of Directors					
Director Certificates					
Interests Register					
Communications with Shareholders					
Correspondence					

f. Were any company records kept on a computer? ☐ Yes ☐ No

What accounting package is used?

Where is the computer located?

Who can access these records?

Is a full back-up available, including software?

☐ Yes ☐ No Give details

26. CAUSE OF LIQUIDATION

What do you believe is the **PRIMARY** cause of the failure of the company? **Tick ONE box only.**

☐ 1. Inability to recover costs

☐ 2. Adverse legal action or lack of funds to finance legal action

☐ 3. Liabilities due to guarantees

☐ 4. Failure of another business organisation

☐ 5. Ill health or absence of health insurance records

☐ 6. Domestic discord or relationship breakdowns including falling out of directors

☐ 7. Withdrawal of credit facilities

☐ 8. Economic conditions including external influences, competition, increases in costs and lack of sales

☐ 9. Lack of business ability including under quoting or failure to assess potential of business

☐ 10. Excessive overheads including interest payments

☐ 11. Excessive drawings

☐ 12. Inability to collect debts due to disputes, faulty work or bad debts

☐ 13. Failure to keep proper books of account and costing records

☐ 14. Lack of sufficient working capital

☐ 15. Failure to provide for taxation

☐ 16. Seasonal conditions including floods and drought

☐ 17. None of the above. Give details

Which other numbers describe **CONTRIBUTING** causes to the failure of the company?

PART C – FINANCIAL CIRCUMSTANCES (Assets and Liabilities)

This information will be used to assess the company's financial position.

27. List any bank accounts *(including building society, overseas funds, credit union, etc)*

Name of Account	Bank and Branch	Account number	Account type *(Cheque, savings etc)*	Balance

28. Do any of the company's bank accounts contain monies held in trust for third parties and / or were deposited for a specific purpose?

☐ Yes ☐ No Give details

29. Does the company own any shares? *(including Government inflation bonds, bonus bonds, unit trust investments, company shares etc)*

Name of Company	How many	Location of Certificate (if applicable) or FIN number	Approximate Value

30. Does the company have any insurance policies?

☐ Yes ☐ No

Name of Policy Owner	Name of Insurance Company	Type of Policy	Date paid up to	Surrender Value

31. Does the company hold security over any property, eg mortgage, debenture or chattel security?

☐ Yes ☐ No If so, please state

Type of security	Name and Address of Property's owner
Value of security	

Description of property secured

32. REAL ESTATE *(Give details of any land or buildings that the company owns)*

Property 1

Address of property		
Nature of interest (joint tenant, tenant in common, absolute ownership)		
Name of Mortgagee or other Chargeholder		
Approx market value $	Amount Owing $	Approx Net Value $

Is this property insured?

☐ Yes ☐ No Name of Insurance Company

Expiry date / /

If this property is on the market please supply details including asking price, name of agent and how long it has been for sale.

Property 2

Address of property		
Nature of interest (joint tenant, tenant in common, absolute ownership)		
Name of Mortgagee or other Chargeholder		
Approx market value $	Amount Owing $	Approx Net Value $

Is this property insured?

☐ Yes ☐ No Name of Insurance Company

Expiry date / /

If this property is on the market please supply details including asking price, name of agent and how long it has been for sale.

Property 3

Address of property		
Nature of interest (joint tenant, tenant in common, absolute ownership)		
Name of Mortgagee or other Chargeholder		
Approx market value $	Amount Owing $	Approx Net Value $

Is this property insured?

☐ Yes ☐ No Name of Insurance Company

Expiry date / /

If this property is on the market please supply details including asking price, name of agent and how long it has been for sale.

33. MOTOR VEHICLES

(a) Current Motor Vehicles *(This includes all cars, motorcycles, trailers, caravans, campervans, boats etc the company currently uses or owns)*

Vehicle 1

Type of vehicle eg car, boat	Registration Number	
Make, model, year		
Present location	Registered owner	
Insurance company	Amount insured for $	
Current WOF (Yes / No) Condition		Odometer
Estimated resale value $ Less amount owed on HP or to secured creditor (if any) $		Net Value $
Name of security holder		
Address of security holder		

Vehicle 2

Type of vehicle eg car, boat	Registration Number	
Make, model, year		
Present location	Registered owner	
Insurance company	Amount insured for $	
Current WOF (Yes / No) Condition		Odometer
Estimated resale value $ Less amount owed on HP or to secured creditor (if any) $		Net Value $
Name of security holder		
Address of security holder		

Vehicle 3

Type of vehicle eg car, boat	Registration Number	
Make, model, year		
Present location	Registered owner	
Insurance company	Amount insured for $	
Current WOF (Yes / No) Condition		Odometer
Estimated resale value $ Less amount owed on HP or to secured creditor (if any) $		Net Value $
Name of security holder		
Address of security holder		

Vehicle 4

Type of vehicle eg car, boat	Registration Number
Make, model, year	
Present location	Registered owner
Insurance company	Amount insured for $
Current WOF (Yes / No) Condition	Odometer
Estimated resale value $ Less amount owed on HP or to secured creditor (if any) $	Net Value $
Name of security holder	
Address of security holder	

(b) Previously Owned Motor Vehicles *(Give particulars of any motor vehicles the company has sold over the last two years)*

Vehicle 1

Make, Model, Year	
Registration Number	
Sale Price $	When sold & details of payment
Name, address and contact phone number of purchaser	

Vehicle 2

Make, Model, Year	
Registration Number	
Sale Price $	When sold & details of payment
Name, address and contact phone number of purchaser	

Vehicle 3

Make, Model, Year	
Registration Number	
Sale Price $	When sold & details of payment
Name, address and contact phone number of purchaser	

34. PLANT AND EQUIPMENT *(including implements, fixtures and fittings but excluding motor vehicles which should be described in question 33).*

Description of Item	Identifying numbers or characters	Type of Security (if any)	Security Holder	Value
				Estimated value $
				Amount owed $
				Net value $
				Estimated value $
				Amount owed $
				Net value $
				Estimated value $
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				Amount owed $
				Net value $

35. STOCK *(including livestock and crops)*

Description of Item	To whom secured	Value
		Estimated value $
		Amount owed $
		Net value $
		Estimated value $
		Amount owed $
		Net value $
		Estimated value $
		Amount owed $
		Net value $
		Estimated value $
		Amount owed $
		Net value $

36. BOOK DEBTS *(Who owes the company money)*

Name	Physical & Postal Address	Goods / Services provided	Date provided	Amount owed	Estimated $ Recoverable

37. INCOMPLETE CONTRACTS

Job Description incl. contractor's contact details	Term of Contract	Work to be completed	Est. Cost to complete	Amount still to realise	Amount Paid to date

Goodwill

If the business can be sold as a going concern, what value would you estimate the goodwill to be – take into account the value of any lease key money paid, turnover figures etc.

$

38. OTHER ASSETS *(Please record any other assets and their values not already declared on this form)*

Description of Item	Cost	Approximate Value

39. ASSET DISPOSALS

Has the company sold any assets including land and buildings since the last set of annual accounts? *(Do not include motor vehicles)*

☐ Yes ☐ No Give details

Description of asset	Net amount received	What did the company do with the money?	Name and address of agent / solicitor / broker

40. ARE ANY DOCUMENTS / ASSETS HELD IN SAFE CUSTODY?

☐ Yes ☐ No Give details

41. CURRENT ACCOUNTS

Provide details of all director / shareholder or other current accounts with the company.

Name	Address	Amount	"Owed to" or "owed by" company

42. CREDITORS

a. Secured Creditors – (Do not include securities over real estate and motor vehicles already described.)

Name and address of secured creditor	Type of security	Approx market value of items secured	Amount	Net Value

Have any creditors taken action to enforce their security?

☐ Yes ☐ No Give details

b. Preferential Creditors – *list Inland Revenue for GST, PAYE and also wages and holiday pay owing to employees.*

Name of Creditors	Address	GST / PAYE / Holiday Pay / Wages	Period of claim	Amount owed

c. Credit Cards *(Please give details relating to any credit store or fuel cards where the company has liability for the debt)*

Card Holder	Card Type eg BNZ, Warehouse, Mobil	Amount owed
	Total $	

d. Unsecured Creditors – *Use additional paper if necessary and attach to form*

Name of Creditor	Postal address	Goods / Services Supplied	Amount owed $

What you do now

Read this Statement of Affairs again. Be sure that everything you have written down is correct to the best of your knowledge. If you have written other details down on separate paper, pin them to this document. Read them again to make sure they are correct.

DECLARATION THAT THE CONTENTS OF THIS DOCUMENT ARE TRUE AND CORRECT

I, _____ in my capacity as _____

to / of the company state that the particulars contained in this document are true and correct.

Signed _____ Date _____

Please return in envelope provided to Private Bag 4751, Christchurch

Ministry of Economic Development
Manatū Ōhanga
Insolvency and Trustee Service

OFFICES SITUATED AT:

NORTHERN REGION - AUCKLAND	Level 5 District Court Building 3 Kingston Street Auckland Phone: 0508 467 658 Fax: (09) 916-4540	**POSTAL** Private Bag 92513 Wellesley Street
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CENTRAL REGION – NAPIER	Level 2 Bower House 26-28 Bower Street Napier Phone: 0508 467 658 Fax: (06) 974-7588	**POSTAL** Private Bag 6001
CENTRAL REGION – WELLINGTON	MED Building 33 Bowen Street Wellington Phone: 0508 467 658 Fax: (04) 495-1253	**POSTAL** Private Bag 5901 Lambton Quay
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www.insolvency.govt.nz