



**NEW ZEALAND
INSOLVENCY AND
TRUSTEE SERVICE**

Statement of Affairs

IN LIQUIDATION COMPANIES ACT 1993

Estate No:

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 (If yes, please give details below)

PART A: CONTACT INFORMATION

1. Personal details

Preferred title:

Mr Mrs Ms Miss Other (Please specify) _____

First name:

Middle Name(s):

Last name:

Address:

Address: _____ Suburb: _____

City: _____ Postcode: _____

Telephone:

Home: _____ Work: _____ Fax: _____

Mobile: _____ Email: _____



**MINISTRY OF BUSINESS,
INNOVATION & EMPLOYMENT**
HĪKINA WHAKATUTUKI

Te Kāwanatanga o Aotearoa
New Zealand Government

Capacity in the Company:

Director Shareholder Manager Employee Accountant Solicitor

Other (please specify) _____

2. Company contact details:**Physical address of company:**

Postal address of company if different:

Telephone:

Work: _____ Mobile: _____ Fax: _____

Email: _____

3. Directors contact details:

Director name (01): _____

Physical address of company:

Postal address of company if different:

Telephone:

Home: _____ Work: _____ Fax: _____

Mobile: _____ Email: _____

Director name (02): _____

Physical address of company:

Postal address of company 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: / /
DD MM YYYY**5. Company solicitor (if any):**

Firm name: _____

Address: _____

Contact Person(s): _____ Phone: _____

Previous solicitor:

Firm name: _____

Address: _____

Contact Person(s): _____ Phone: _____

Date ceased acting: / /
DD MM YYYY**PART B: BACKGROUND****6. Nature of company's business (give details):**

Date started trading: / / Date ceased trading: / /
DD MM YYYY DD MM YYYY**7a. Does / did the company rent / lease business premises?** Yes No**7b. Name of landlord / agent of business premises:**

Name: _____

Address: _____

Phone: _____

7c. What date is the rent paid upto? / / What was the amount paid? _____
DD MM YYYY**7d. Is there a lease agreement?** Yes No *What is the term of the lease?* _____**7e. Who has the company's copy of the lease agreement?** _____**7f. Are there any subleases?** Yes No *(If yes, please give details)* _____**7g. Have any leases been assigned, surrendered or otherwise disposed of by the company before the date:** Yes No *(If yes, please give details)* _____

7h. Are the premises protected by a security alarm? Yes No (If yes, please give details below)

7i. 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 (If yes, please give details below)

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: / /
DD MM YYYY

Date ceased: / /
DD MM YYYY

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

Yes No Debenture holder: _____

10b. Have steps been taken to realise security?

Yes No (If yes, please 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 (If yes, please give details) _____

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

Yes No (If yes, please give details) _____

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

Yes No (If yes, please 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 (If yes, please 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 (If yes, please give details) _____

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

Yes No (If yes, please give details) _____

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

Yes No (If yes, please give details) _____

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

Yes No (If yes, please 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 (If yes, please 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 (If yes, please give details) _____

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

Yes No (If yes, please 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 (If yes, please 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: _____

25b. Where are the accounting records located? _____**25c. What was the date of the last annual financial statement?** / /
DD MM YYYY**25d. Has the company ever been, or is it currently in receivership?** Yes No

Name registered: _____ GST number: _____

Type of registration: Invoice basis Payment basis Hybrid basisPeriod covered by last return: / / to / /
DD MM YYYY DD MM YYYYFrequency of returns: 1 month 2 months 3 months**25e. Were the following records kept?**

| | Not Sure | Yes | No | Are these records computerised? | Location of records: |
|--|--------------------------|--------------------------|--------------------------|--|----------------------|
| Cash book – cash in / cash out | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> Yes <input type="checkbox"/> No | _____ |
| Cheque butts – (since commencement period) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> Yes <input type="checkbox"/> No | _____ |
| Deposit butts – of last prepared accounts | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> Yes <input type="checkbox"/> No | _____ |
| Current cheque and deposit books | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> Yes <input type="checkbox"/> No | _____ |
| Bank statements | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> Yes <input type="checkbox"/> No | _____ |
| Receipt books | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> Yes <input type="checkbox"/> No | _____ |
| Creditors invoices | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> Yes <input type="checkbox"/> No | _____ |
| Debtors ledgers and current invoices | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> Yes <input type="checkbox"/> No | _____ |
| Ledgers | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> Yes <input type="checkbox"/> No | _____ |
| Journals | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> Yes <input type="checkbox"/> No | _____ |
| Copies of annual financial statements | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> Yes <input type="checkbox"/> No | _____ |
| Hire purchase agreements | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> Yes <input type="checkbox"/> No | _____ |
| Contract papers and other legal documents | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> Yes <input type="checkbox"/> No | _____ |
| Asset register | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> Yes <input type="checkbox"/> No | _____ |
| Stock sheets | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> Yes <input type="checkbox"/> No | _____ |
| GST records | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> Yes <input type="checkbox"/> No | _____ |
| Wage records | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> Yes <input type="checkbox"/> No | _____ |

| | | | | | | |
|----------------------------------|--------------------------|--------------------------|--------------------------|------------------------------|-----------------------------|-------|
| Employment contracts | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> Yes | <input type="checkbox"/> No | _____ |
| Constitution | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> Yes | <input type="checkbox"/> No | _____ |
| Minute book | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> Yes | <input type="checkbox"/> No | _____ |
| Register of shareholders | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> Yes | <input type="checkbox"/> No | _____ |
| Register of directors | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> Yes | <input type="checkbox"/> No | _____ |
| Director certificates | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> Yes | <input type="checkbox"/> No | _____ |
| Interests register | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> Yes | <input type="checkbox"/> No | _____ |
| Communications with shareholders | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> Yes | <input type="checkbox"/> No | _____ |
| Correspondence | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> Yes | <input type="checkbox"/> No | _____ |

25f. 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 (If yes, please give details) _____

26. Cause of liquidation

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

- | | |
|--|---|
| <input type="checkbox"/> 1. Inability to recover costs | <input type="checkbox"/> 10. Excessive drawings |
| <input type="checkbox"/> 2. Adverse legal action or lack of funds to finance legal action | <input type="checkbox"/> 11. Inability to collect debts due to disputes, faulty work or bad debts |
| <input type="checkbox"/> 3. Liabilities due to guarantees | <input type="checkbox"/> 12. Failure to keep proper books of account and costing records |
| <input type="checkbox"/> 4. Failure of another business organisation | <input type="checkbox"/> 13. Lack of sufficient working capital |
| <input type="checkbox"/> 5. Ill health or absence of health insurance records | <input type="checkbox"/> 14. Failure to provide for taxation |
| <input type="checkbox"/> 6. Domestic discord or relationship breakdowns including falling out of directors | <input type="checkbox"/> 15. Seasonal conditions including floods and drought |
| <input type="checkbox"/> 7. Withdrawal of credit facilities | <input type="checkbox"/> 16. COVID-19 |
| <input type="checkbox"/> 8. Economic conditions including external influences, competition, increases in costs and lack of sales | <input type="checkbox"/> 17. None of the above. Give details |
| <input type="checkbox"/> 9. Lack of business ability including under quoting or failure to assess potential of business | _____ |
| | _____ |
| | _____ |

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 (If yes, please 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 01**

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 / /
DD MM YYYY

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 02**

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 / /
DD MM YYYY

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 03**

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 / /
DD MM YYYY

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

33a. Current Motor Vehicles *(This includes all cars, motorcycles, trailers, caravans, campervans, boats etc the company currently uses or owns):*

Vehicle 01

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 02

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 03

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 04

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: _____

33b. Previously Owned Motor Vehicles *(Give particulars of any motor vehicles the company has sold over the last two years):***Vehicle 01**

Make, model, year: _____

Registration number: _____ Sale price: \$ _____

When sold and details of payment: _____

Name, address and contact phone number of purchaser:

_____**Vehicle 02**

Make, model, year: _____

Registration number: _____ Sale price: \$ _____

When sold and details of payment: _____

Name, address and contact phone number of purchaser:

_____**Vehicle 03**

Make, model, year: _____

Registration number: _____ Sale price: \$ _____

When sold and 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):

| 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: \$ _____ Amount owed: \$ _____ Net 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: \$ _____ |
| | | | | Estimated value: \$ _____ Amount owed: \$ _____ Net value: \$ _____ |
| | | | | Estimated value: \$ _____ 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 and 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: | Estimated 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 (If yes, please give details below)

| 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 (If yes, please give details below)

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

43a. Secured Creditors – (Do not include securities over real estate and motor vehicles already described.):

| Name and address of: | Type of security: | Approx market value of items secured: | Amount: | Net value: |
|----------------------|-------------------|---------------------------------------|----------|------------|
| _____ | _____ | \$ _____ | \$ _____ | \$ _____ |
| _____ | _____ | \$ _____ | \$ _____ | \$ _____ |
| _____ | _____ | \$ _____ | \$ _____ | \$ _____ |
| _____ | _____ | \$ _____ | \$ _____ | \$ _____ |
| _____ | _____ | \$ _____ | \$ _____ | \$ _____ |

Have any creditors taken action to enforce their security? Yes No (If yes, please give details below)

WHAT YOU DO NOW

If you have written other details down on separate paper, pin them to this document.

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.

Signature: _____

Date:

| | | | | |
|----|---|----|---|------|
| | / | | / | |
| DD | | MM | | YYYY |