



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 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)
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>

Telephone Mobile Fax

Email

3. DIRECTORS CONTACT DETAILS

Director 1
Name

Physical Address	Postal Address (if different)
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>

Telephone

Home <input type="text"/>	Work <input type="text"/>	Fax <input type="text"/>
---------------------------	---------------------------	--------------------------

Mobile <input type="text"/>	Email <input type="text"/>
-----------------------------	----------------------------

Director 2
Name

Physical Address	Postal Address (if different)
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>

Telephone

Home <input type="text"/>	Work <input type="text"/>	Fax <input type="text"/>
---------------------------	---------------------------	--------------------------

Mobile <input type="text"/>	Email <input type="text"/>
-----------------------------	----------------------------

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

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			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

11. Excessive drawings

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

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

3. Liabilities due to guarantees

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

4. Failure of another business organisation

14. Lack of sufficient working capital

5. Ill health or absence of health insurance records

15. Failure to provide for taxation

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

16. Seasonal conditions including floods and drought

7. Withdrawal of credit facilities

17. None of the above. Give details

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

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

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 \$

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	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 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

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.

Signed

Date