



Harbour View Accounting

## Harbour View Accounting

Accountants - Independent Examiners - Charity Specialist

### EXAMINATION QUESTIONNAIRE

Full Name of Charity: \_\_\_\_\_  
Registered Charity Number: \_\_\_\_\_ Registered Company Number: \_\_\_\_\_  
Name of Contact Person: \_\_\_\_\_  
Registered Address: \_\_\_\_\_  
Contact Telephone Number: \_\_\_\_\_ Contact Mobile Number: \_\_\_\_\_  
Contact Email Address: \_\_\_\_\_  
Accounting Period End Date: \_\_\_\_\_ Estimated Total Income for the Financial Period: £ \_\_\_\_\_

#### Please Answer the Following Questions:

How do you Record Restricted Donations and/or Offerings for Special Purposes:	Yes/No	
Does the Charity hold Fixed Assets such as Furniture and Equipment?	Yes/No	
Have SORP Compliant Accounts been Prepared?	Yes/No	
Does the Charity have any Employees?	Yes/No	
Does the Charity Operate a PAYE Scheme?	Yes/No	
Does the Charity Operate a Pension Scheme	Yes/No	<i>If 'Yes', please provide Pension Details</i>
Are any Employees Self Employed?	Yes/No	
Have all Trustees, Employees & Volunteers in Eligible Positions Received a DBS Check?	Yes/No	
Does the Church/Charity Own any Land & Buildings?	Yes/No	<i>If 'Yes', please provide Land Registry Details</i>
Does the Charity have Trustee Indemnity Insurance Policy in Place?	Yes/No	

If you are an Incorporated Charity and require exemption from paying Corporation Tax, you must complete a ChA1 and obtain an exemption reference number. Also, ensure you have a PSC Register - visit [www.gov.uk](http://www.gov.uk) for more information.

Unincorporated Charity - If income and expenditure exceeds £250,000, full accruals accounts will be required and we will need a list of debtors and creditors both at the beginning and end of the financial period and this will need to include any Gift Aid Tax Recoverable.

Please provide the following documents and records (Scanned copies would be preferred as this will reduce our carbon footprint).  
We will make a minimum charge of £12.50 for Postage & Handling Costs.  
Additional postage costs may be incurred for large parcels, additional copies and next day deliveries.

Please provide the following information and documentation, so we may complete the preparation of the Reports and Financial Statements & Independent Examination of Accounts.  
Scanned copies would be preferred as this will reduce our carbon footprint these can be sent to: support@harbourviewaccounting.co.uk

- |   |   |
|---|---|
| <input type="checkbox"/> Copy of the Charity's Governing Documents (Trust Deed, Constitution or Mem & Arts) | <input type="checkbox"/> Gift Aid Tax Reference Number:                                     |
| <input type="checkbox"/> Cash Book(s) and Ledger(s) or Disc   | <input type="checkbox"/> Full Bank Statements for the Financial Period                      |
| <input type="checkbox"/> Bank Reconciliation to Cash Book   | <input type="checkbox"/> Records of Cash Donations  |
| <input type="checkbox"/> PAYE Records   | <input type="checkbox"/> Gift Aid Receipt Records   |
| <input type="checkbox"/> Pension Scheme Details   | <input type="checkbox"/> Invoices or Receipts for all Payments Over £500                    |
| <input type="checkbox"/> Copy of the Trial Balance or Draft Accounts  | <input type="checkbox"/> Details of Land & Buildings  |
| <input type="checkbox"/> Details of any Liabilities at the end of the Financial Period                      | <input type="checkbox"/> Inventory of Assets and their Value (Fixed Assets Register)        |
| <input type="checkbox"/> Copy of minutes of Trustees' Meetings  | <input type="checkbox"/> Details of Insurances  |
| <input type="checkbox"/> Details of Grants Paid in Relation to Charitable Objects                           | <input type="checkbox"/> Trustees' Report Reviewing the Period's Charitable Activities      |
| <input type="checkbox"/> Copy of Prior Period Accounts (if not held on file)                                | <input type="checkbox"/> Details of Related Party Transactions and any Associated Companies |
| <input type="checkbox"/> Mortgage Account Statements  | <input type="checkbox"/> List of Donations from Trustees/Related Parties                    |
| <input type="checkbox"/> Photo ID for each Trustee/Director and Proof of Residency (If not held on file) *  | <input type="checkbox"/> List of Charity Activities as per Charitable Objects               |

\* This information is required legally under the Money Laundering Regulations 2007 and is explained in more detail in our Letter of Engagement.

When your records are received we will confirm our quote for the Independent Examination and any other work which is required. Any additional work that is required but would incur an additional fee is charged on an hourly basis and will be agreed prior to any work commencing.

Please Note - Our invoices are raised at the point of draft accounts being issued. Our terms are 30 days.

All correspondence and documentation will be sent via email to the email address provided above.  
If you wish to receive documentation by post, please tick here

We are happy to lodge your accounts with the appropriate statutory bodies and complete any necessary Annual Return Forms.  
There will be an additional charge of £75.00 per hour. If 'Yes', please submit pass codes \*  
(We accept no responsibility for the statutory submissions should you decide not to use this service)

Yes/No

If you wish to use this service, please answer the additional questions at the end of this questionnaire on Page 2

IN AN EFFORT TO REDUCE OUR CARBON FOOTPRINT, FINAL ACCOUNTS WILL BE ISSUED IN PDF FORMAT.  
IF YOU REQUIRE A BOUND SET OF ACCOUNTS PLEASE TICK THE BOX



Telephone: 01903954676 –  
Email:support@harbourviewaccounting.co.uk

MobileContact: 07738914280

- HelpLine: 07738914280  
www.harbourviewaccounting.co.uk



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**EXAMINATION QUESTIONNAIRE**

**INFORMATION REQUIRED TO COMPLETE THE STATUTORY ANNUAL RETURN FORMS**

**Online Log On Codes**

Charity Commission Password:

Companies House Authentication Code:

In order to complete the Statutory Annual Return Forms - Please Answer the Following Questions:

Where the Charity Operates:

Number of Volunteers not including Trustees/Directors:

Does the Charity own Land and Buildings Yes/No

Has the Charity claimed Gift Aid in the Financial Period: Yes/No

Does the Charity Raise Funds from the Public: Yes/No

Does the Charity use Professional Fundraisers: Yes/No

Does the Charity have any Trading Subsidiaries: Yes/No

Are any Trustees Paid for Acting as a Trustee of the Charity: Yes/No

Any Grant Making Activities: Yes/No

Does the Charity have any Other Regulators: Yes/No

Does the Charity have any Linked Charities: Yes/No

The Charity Commission Annual Return may be subject to change and we may need to ask for additional information at any time

Do you have Written Policies in the Following Areas:

Risk Management Yes/No

Investment Yes/No

Vulnerable Beneficiaries Yes/No

Conflict of Interest Yes/No

Volunteer Management Yes/No

Complaints Handling Yes/No

Please ensure we have a complete set of details for each Trustee/Director, as these details are required to conform to Anti-Money Laundering Legislation:

Full Name: ..... Full Name: .....

Address: ..... Address: .....

Postcode: ..... Postcode: .....

Telephone: ..... Telephone: .....

Date of Birth: ..... Date of Birth: .....

Date of Appointment: ..... Date of Appointment: .....

Full Name: ..... Full Name: .....

Address: ..... Address: .....

Postcode: ..... Postcode: .....

Telephone: ..... Telephone: .....

Date of Birth: ..... Date of Birth: .....

Date of Appointment: ..... Date of Appointment: .....

*(Include a separate sheet for additional Trustees)*

Signed by: .....

Date: .....

Full Name: .....

Position: .....