

Instant Asset Write Off Application

Asset Information			
Description of Asset(s) being purchased:			
How will the Asset be used and what revenues will be generated?			
Delivery Date: E	xpected Profit for the 2	2021 Financial Year be	fore the Asset Purchase:
Total Purchase Cost:		New or Second-ha	and:
Vendor Name:		Vendor Contact P	erson:
Vendor Phone:		Vendor Email:	
COVID-19 (What business relief and/or	stimulus have you o	btained or are seekir	ıg to obtain?)
Job Keeper and number of eligible staff			
PAYG Cash Flow Boost			
Payroll Tax Relief and in which States			
Instant Asset Write Off			
Landlord – deferred rental			
Asset/Equipment finance – deferred paymen	its		
Government 50% Guarantee Loan Scheme	for SME's		
Early Access to Superannuation by Directors	3		
Any other State Government stimulus or loan	าร		
Other			
Business Information			
Company/Trust/Business Name:			ABN:
Business Address:			
Postal Address:			
Phone Number: ()	Fax Number: ()	Mobile Number:
Contact Person:	Email:		
Accountant Firm:			
Accountant Address:			
Phone Number: ()	Fax Number: ()	Mobile Number:
Contact person:	Email:		
Business Owners / Directors / S	hareholders / of	her Guarantors	

Business Owners / Directors / Snareholders / other Guarantors				
Full Name AND Date of Birth	Home Address	Own or Rent?		

Customer (Debtor) Information	
How many customers owe you money, at present?	
How much do they owe you in total?	\$
Are your sales mainly to repeat or to new customers each time?	
What credit terms do you normally provide to your customers? for example - 30 days from end of month	
Do you usually obtain purchase orders?	Yes / No
Do you usually get signed proofs of delivery?	Yes / No
Have you entered into a contract, written trading terms or a Supplier Agreement with your customers?	Yes / No
Do you sell on consignment, sale or return, or progress claim basis?	Yes / No
How many invoices do you raise per month?	
List any customers that you also purchase goods and/or services from:	-

Current Finance Facilities (attach list if space insufficient)					
Type of Facility	Amount owing	Bank / Finance Coy.	Security		
Overdraft	\$				
Credit Cards	\$				
Equipment Loans / Hire Purchase	\$				
Other (please specify)	\$				

Please also provide this information	
Aged Debtors Ledger Detailed at most recent month end	
Aged Debtors Ledger Detailed at month end one month prior	
Aged Debtors Ledger Detailed at month end two months prior	
Copies of 3 recent Invoices sent to customers, AND the Purchase Orders AND the Proofs of Delivery	
Aged Creditors Ledger Summary at most recent month end	
Business Bank Statements from 1 January 2020 to the current date	
ATO Business Portal transactions from 1 July 2019 showing BAS/GST lodgments and IAS/PAYG Withholding lodgments	
ATO Income Tax Account from 1 July 2019 showing Income Tax lodgment, payments, and outstanding balance	
Most recently prepared Financial Statements including the Depreciation Schedule and Tax Returns	
Management Accounts - Profit & Loss and Balance for the period since the most recent Financial Statements	
Statement of Assets & Liabilities for Directors and Shareholders accompanied with a signed Privacy Disclosure Consent, copies of Council Rates Notices AND most recent Mortgage Loan account statements for real estate properties.	