

Accountant's Report

Applicant _____

Company No

Company Name _____

No. of Employees

How Many Years in Business? _____

Director's	% Ownership	
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____
4. _____	_____	_____

Accounts	Period End No. Of Months	A / D / M	A / D / M	A / D / M
Profit & Loss Account				
Turnover/Sales				
Gross Profit				
Net Profit Before Tax				
Directors Remuneration / Drawings				
Balance Sheet				
- Fixed Assets				
- Current Assets				
Current Liabilities excl Bank Borrowings				
Level of Borrowings				
Short Term (< 1 Year)				
Long Term (> 1 Year)				
Net Worth				

Audited /
Draft /
Management

PLEASE CIRCLE

**Where the accounts are denominated in a currency other than Euro please state which currency is used.*

Auditors Report Qualified; YES / NO

You are requested to submit the latest audited accounts/financial statements to accompany this certificate in the event that;

- (a) The accounts for any of the above three years show a pre-tax loss or have a negative net worth in the balance sheet
- (b) You have qualified your Auditors Report in any of the above three years
- (c) You cannot confirm any of the following items;

We confirm the personal & business liabilities to the Revenue Commissioner (PAYE/PRSI/VAT/Corporation Tax /Income Tax) are up to date as at the financial year end. If ?NO? please give details by separate attachment YES / NO

We confirm that the above figures are a true extract from the Audited/Draft/Management financial statements for the above business YES / NO

In the event of a limited company, has the director guaranteed any of the borrowings specified above? YES / NO

Are you aware of any significant events affecting the business/company since the most recent financial Year End? YES / NO

Are the Directors Remuneration/Drawings in addition to the Net Profit Before Tax & available for distribution to the director? YES / NO

Stamp

Signed; _____ Date; _____

If stamp not available please attach covering letter on headed paper

Accountancy Qualification ACA / FCA / ACCA / FCCA / CPA / OTHER (circle as appropriate)