

Business Income Loss Information Gathering Worksheet

Basic Information

Name of Insured _____ Policy Number _____

Address _____ Phone _____

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Cremers, Holtzbauer & Nearmyer, P.C.**

Contact Person _____ Date of Loss _____

Responsibilities _____ Phone **515-274-4804**
Does the company use an accountant

Other key people and responsibilities: **email: info@chncpa.com**
Who _____

_____ Address _____

_____ City _____

_____ Phone number _____

Type of business (check one box)

- Corporation (1120 and 1120S)
- Partnership (1065)
- Proprietorship (1040 and Schedule C)
- Limited Liability Company (1065)

Services performed (check the boxes)

- Tax return
- Monthly financial statements
- Quarterly financial statements
- Annual financial statements
- Other, describe _____

Briefly describe what the company does, what happened to cause the loss, how the loss has affected the business and what the expected suspension period may be and if it is a total suspension:

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Based upon your discussion with the responsible person(s), answer the following questions.
Not all questions may be applicable.

What kind of product is sold _____

How is it sold _____

To whom is it sold _____

How is it produced _____

What raw materials are purchased _____

Who are the materials purchased from _____

Who pays the bills _____

Who makes the bank deposit _____

Are the records computerized _____

Who runs the computer and updates it _____

Who keeps the hand prepared accounting records _____

Are financial statements done internally or externally _____

And how often; never, monthly, quarterly, annually _____

Is the business seasonal or dependant on specific days of the week _____

Describe the seasonality or dependance _____

Has the business been expanding or decreasing _____

Why has it been expanding or decreasing _____

How often is physical inventory taken _____

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Urbandale, Iowa

Phone 515-274-4804

email: info@chncpa.com

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Are employees paid by the hour or salary or both _____

Who are the salary employees _____

What do the salary employees do _____

Who are the officers or executives of the company _____

Does the company have any "contract employees" who provide services _____

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Are there any related companies, and if so, who and what are they _____
email: info@chncpa.com

Does the company own or rent the facility it occupies _____

If rented, who owns the facility and is the person an owner or related to an owner _____

What bank does the company use and what kind of accounts does it have with the bank _____

Records to obtain (check the ones that pertain)

- Daily sales records for the 60 days before the loss and as many days after
- Monthly financial statements for two years
- Quarterly financial statements for two years
- Annual financial statements two years
- Copy of computerized general ledger for most recent prior year
- Copy of computerized general ledger for current year as current as possible
- Tax returns for prior three years
- Copy of latest physical inventory
- Copy of most recent four quarters sales tax returns
- Copy of most recent four quarters payroll tax returns
 - IRS form 941
 - State unemployment returns
 - Copy of last year's forms W-2
- Copy fo the last four payroll period reports
- Copy of lease agreement