

Vantage Global Tax Fee Protection

Full Tax Enquiry Cover



VANTAGE
G L O B A L

Practice details

Please provide as much information as possible but do not delay returning this form if some answers cannot be given. Please mark with an "E" any information that is estimated. If the information is not available or is not known, please indicate as "N/a" or "N/k".

Firm details			
Firm name:			
Firm address:			
Postcode:		City/town:	
Website:		Telephone:	

Contact details			
*Contact surname and given name:		Position:	
Email address:		Telephone:	
* The main contact should be the practice principal or the partner/director who is or would be responsible for oversight of tax fee protection at the practice. To enable us to comply with the Money Laundering Regulations, in particular client due diligence, we are required to obtain that person's full name, including middle names, and their date of birth.			

Practice information			
No. of partners/directors			
Does the practice specialise in any client categories?	Yes/No		
If so, please specify which trades/professions			
Are more than 25% of clients predominantly cash traders?	Yes/No		
Insurance broker			
Address			
Telephone/mobile			
FSMA number			
The policy can only be underwritten by an insurance intermediary registered with the FSMA. The firm can be chosen freely. In case of several brokers, please indicate which broker you want to work with, or else provide a list with all the brokers. Damage claims also have to be submitted through the insurance broker.			

Practice client details	Number
Naamloze vennootschappen (public limited companies under Belgian law; NV)	
Besloten vennootschappen met beperkte aansprakelijkheid (private limited companies under Belgian law; BVBA, CVBA)	
Companies with unlimited and several liability (VOF, Comm.V, CVOHA, CVA)	
Sole traders (including any personal tax clients with gross annual rental income over €50k)	
Personal tax return clients (excluding directors, partners and sole traders)	
Business clients with annual turnover above € 10 million	
Total practice clients (please estimate where numbers are not readily available)	
How many of these clients are not subject to VAT?	

Practice hourly rates *	Minimum rate excl. VAT	Maximum rate excl. VAT
Partner/Director		
Manager		
Senior		
Junior		
Clerical/admin		
Other (please specify)		
* As would apply to tax enquiry type work. Leave blank if such staff wouldn't be involved in such work.		
Name and address of specialist		
Nature of specialism (e.g. direct taxes, VAT, social security)		
Applicable hourly rates	From	EUR to EUR

Practice tax enquiry/claims history

To enable us to give the most competitive quote, please supply as much information as possible for a period of at least three years:

- If you have an existing Tax Fee Protection Scheme, your current provider should supply a claims history on request. If this is not available, please supply details of claims made from your own records.
- If you do not have an existing scheme, please estimate the approximate costs that would have been claimed if a scheme had been in place.

If in doubt, estimate to the best of your abilities and discuss this with Vantage.

NB: Whilst you should supply as accurate information as possible, please do not delay completing this form where the information is not readily available.

Type of tax enquiry/compliance check	Number	Total invoiced fees and costs excl. VAT		
		Year X	Year X-1	Year X-2
Corporation and income tax full enquiries				
Corporation and income tax aspect enquiries				
VAT compliance checks (incl. tax return and cessation enquiries)				
Advance business tax compliance checks				
Accounting checks by social or labour inspectorate				
Business record checks				
Works related to requests for information, notifications of change, official assessments, objections				
Verification of income from movable and immovable properties, inheritance tax enquiries				
Other				
	TOTAL			

Any additional relevant information:

--

Number of partners and staff members working at the firm with a recognised professional title:

IBR:	
IAB:	
BIBF:	

You will receive a quote on the basis of the details provided above.

The rate will be an amount multiplied by the specified number of customers.

You can also indicate the turnover fees without VAT of the previous fiscal year.

Declaration

I/We declare that (a) this proposal form has been completed after proper enquiry; (b) its contents are true, accurate and complete (c) all facts and matters which may be relevant to the consideration of my / our proposal for insurance have been disclosed.

Signed		Dated	
Print Name		Position	