

P11D QUESTIONNAIRE

| | | | |
|--|-----|--------------------------|-----------------------------|
| Company Name | | | |
| Company PAYE Reference | | | |
| Company Accounts Office Reference | | | |
| Employee Name | | | |
| Company Director | Yes | <input type="checkbox"/> | No <input type="checkbox"/> |
| Employee National Insurance Number | | | |
| Employee Date of Birth | | | |

P11D Information - please provide figures inclusive of VAT

| | £ Total annual cost | £ Amounts repaid by employee |
|--|------------------------|------------------------------------|
| Private Medical/Dental Insurance | <input type="text"/> | <input type="text"/> |
| Telephone Line In Company Name: | | |
| Home telephone bills - Line rental paid | <input type="text"/> | <input type="text"/> |
| Home telephone bills - telephone calls paid | <input type="text"/> | <input type="text"/> |
| Please indicate % business use of telephone | | <input type="text"/> % |
| Telephone Line In Individuals Name: | | |
| Home telephone bills - Line rental paid | <input type="text"/> | <input type="text"/> |
| Home telephone bills - telephone calls paid | <input type="text"/> | <input type="text"/> |
| Please indicate % business use of telephone | | <input type="text"/> % |
| Loans to directors/employees (includes directors overdrawn loan accounts) | | |

Reimbursed Expenses

If you have agreed a dispensation with HMRC that you are not required to report business expenses on P11ds we will not need details of any expenses covered by that dispensation unless there is an element of personal benefit

| | £ Cost to you | £ Amounts repaid by employee |
|--|----------------------|------------------------------------|
| Travel & Subsistence (excluding authorised mileage rates see overleaf) <i>If any of these expenses are not for business purposes, please indicate the private element</i> | <input type="text"/> | <input type="text"/> £ |
| Entertainment <i>If any of these expenses are not for business purposes, please indicate the private element</i> | <input type="text"/> | <input type="text"/> £ |
| Professional Subscriptions | <input type="text"/> | <input type="text"/> |
| Other Subscriptions (e.g. gym membership) | <input type="text"/> | <input type="text"/> |
| Other reimbursed expenses (please provide breakdown of individual categories of expenses) <i>If any of these expenses are not for business purposes, please indicate the private element</i> | <input type="text"/> | <input type="text"/> £ |
| Payments made on Company Credit card <i>If any of these expenses are not for business purposes, please indicate the private element</i> | <input type="text"/> | <input type="text"/> £ |
| Payments made on Employee Credit card <i>If any of these expenses are not for business purposes, please indicate the private element</i> | <input type="text"/> | <input type="text"/> £ |
| <i>If you do not yet have a dispensation agreed with HMRC and would like to be considered, please tick the box and we will prepare the application for you</i> | | <input type="checkbox"/> |

Miscellaneous Benefits/Expenses

| | | |
|--|----------------------|----------------------|
| Details of any company assets used personally or transferred to employees | <input type="text"/> | <input type="text"/> |
| Mileage - please confirm business mileage paid to employees using their own vehicles is paid at no more than 45p for the first 10,000 business miles and 25p for each business mile thereafter. | Yes | No |
| Any other benefits/expenses - please provide details e.g. living accommodation | <input type="text"/> | <input type="text"/> |

MOTOR VEHICLE QUESTIONNAIRE

Motor Vehicles Made Available

| | | |
|--|--|--------------------------------------|
| Numberplate of vehicle | <input type="text"/> | |
| Copy of vehicle registration document provided | Yes <input type="text"/> | No <input type="text"/> |
| If, no reg. document please provide the following information | Make <input type="text"/> | Model <input type="text"/> |
| CO2 Emmissions | | <input type="text"/> |
| List price when car first registered including VAT (please note that this is not the price paid for the car if not bought new) | | £ <input type="text"/> |
| Date vehicle first registered <input type="text"/> | Engine Capacity | <input type="text"/> |
| Details of any capital contribution made by employee to cost of vehicle | | £ <input type="text"/> |
| Date vehicle purchased (if after 6 April 2008) | | <input type="text"/> |
| Dates the vehicle was available during the year | Available From <input type="text"/> | Available To <input type="text"/> |
| Please confirm any amounts reimbursed by the employee for use of the car | | £ <input type="text"/> |
| Is the car petrol or diesel? | Petrol <input type="text"/> | Diesel <input type="text"/> |
| If diesel is the car Euro IV compliant? | Yes <input type="text"/> | No <input type="text"/> |

Fuel provided for private use

| | | |
|---|-----------------------------|----------------------------|
| Did you provide the employee with fuel for private mileage? | Yes <input type="text"/> | No <input type="text"/> |
| Does the employee repay the company for private motoring? | Yes <input type="text"/> | No <input type="text"/> |

If the employee had more than one vehicle please complete a further sheet for the second vehicle.