

# CONTRACTORS FINANCIAL STATEMENT

(Prescribed Form)

Financial Statement as of \_\_\_\_\_, 20\_\_\_\_ (not more than one year old) is for:

Name of Applicant: \_\_\_\_\_  
(Sole Proprietor, Corporation, Partnership, Joint Venture, LLC, LLP)

**Note:** The name listed on this financial statement must be exactly the same name listed on your application under "Name of Applicant".

## ASSETS:

### CURRENT ASSETS:

Cash (include checking account) ..... \$ \_\_\_\_\_  
Savings Account ..... \_\_\_\_\_  
Time certificates (within 1 year) ... \_\_\_\_\_  
Deposit with bids ..... \_\_\_\_\_  
TOTAL CASH ..... \$ \_\_\_\_\_  
Accounts receivable (completed contracts) ..... \_\_\_\_\_  
Earned estimated & retainage (uncompleted contracts) \_\_\_\_\_  
Other accounts receivable ..... \_\_\_\_\_  
Work in progress (unbilled) ..... \_\_\_\_\_  
Notes receivable ..... \_\_\_\_\_  
Stocks and bonds ..... \_\_\_\_\_  
Life insurance (cash value) ..... \_\_\_\_\_  
Other current assets ..... \_\_\_\_\_  
TOTAL CURRENT ASSETS ..... \$ \_\_\_\_\_

### OTHER ASSETS:

Material in stock (not included in any items above) .... \$ \_\_\_\_\_  
Inventory or other materials ..... \_\_\_\_\_  
Other assets ..... \_\_\_\_\_  
TOTAL OTHER ASSETS ..... \$ \_\_\_\_\_

### FIXED ASSETS:

Equipment at net book value ..... \$ \_\_\_\_\_  
Real estate ..... \_\_\_\_\_  
Furniture and fixtures at net book value ..... \_\_\_\_\_  
Tools ..... \_\_\_\_\_  
Other fixed assets ..... \_\_\_\_\_  
TOTAL FIXED ASSETS ..... \$ \_\_\_\_\_

TOTAL ASSETS ..... \$ \_\_\_\_\_

(SIGNATURE OF APPLICANT REQUIRED ON PAGE 2)

**LIABILITIES:****CURRENT LIABILITIES:**Notes payable (*due within one year*):

To banks regular ..... \$ \_\_\_\_\_

To material men ..... \_\_\_\_\_

To other (*exclusive of Equipment*).... \_\_\_\_\_

TOTAL NOTES PAYABLE..... \$ \_\_\_\_\_

Accounts payable:

Subcontractors..... \$ \_\_\_\_\_

Material men..... \_\_\_\_\_

Others..... \_\_\_\_\_

TOTAL ACCOUNTS PAYABLE..... \$ \_\_\_\_\_

Current maturities (*long-term debt*)..... \$ \_\_\_\_\_

Accrued payrolls..... \_\_\_\_\_

Federal and state income tax..... \_\_\_\_\_

Payroll taxes (*including F.I.C.A.  
S.U.I. and income taxes withheld*)..... \_\_\_\_\_

Other accrued taxes, interest, etc..... \_\_\_\_\_

Encumbrances on equipment (*due within 1 year*).... \_\_\_\_\_Other Current Liabilities (*specify*):

\_\_\_\_\_

\_\_\_\_\_

TOTAL CURRENT LIABILITIES..... \$ \_\_\_\_\_

**LONG-TERM LIABILITIES:**Long-term debt (*less portion due within one year*).... \$ \_\_\_\_\_Encumbrances on equipment (*due after 1 year*)..... \_\_\_\_\_

Encumbrances on real estate..... \_\_\_\_\_

Billings in excess of cost on uncompleted contracts.. \_\_\_\_\_

Other long-term liabilities (*specify*):

\_\_\_\_\_

\_\_\_\_\_

TOTAL LONG-TERM LIABILITIES..... \$ \_\_\_\_\_

TOTAL LIABILITIES..... \$ \_\_\_\_\_

Financial Statement as of \_\_\_\_\_, 20\_\_\_\_ (**not more than one year old**) is for:

Name of Applicant: \_\_\_\_\_

(*Sole Proprietor, Corporation, Partnership, Joint Venture, LLC, LLP*)**NET WORTH:**Capital stock (*if corporation, show shares  
authorized, issued-par value*)..... \$ \_\_\_\_\_

Surplus..... \_\_\_\_\_

TOTAL NET WORTH..... \$ \_\_\_\_\_

TOTAL LIABILITIES AND NET WORTH..... \$ \_\_\_\_\_

**THE STATEMENT BELOW MUST BE  
SIGNED BY THE APPLICANT, WHETHER  
CPA USES THIS FORM OR HIS OWN.**

**This statement must be signed, whether CPA uses this form or his own.**

I hereby certify as owner, officer, partner, manager, member or R.M.E. that the statements contained on this statement are true and correct. I certify that any misrepresentation is grounds for refusal or subsequent revocation of license and is a misdemeanor (*Sec. 710-1017, Sections 436B-19, and 444-17, Hawaii Revised Statutes*).

SIGNATURE OF APPLICANT: \_\_\_\_\_

TITLE (*owner, president, etc.*): \_\_\_\_\_

In the opinion of the undersigned, the above statement fairly presents, on the date indicated, the financial condition of the applicant. The undersigned has no interest in the above enterprise.

SIGNATURE OF C.P.A. or P.A.: \_\_\_\_\_

LICENSE NO.: \_\_\_\_\_

PRINT NAME: \_\_\_\_\_

STATE: \_\_\_\_\_

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