

WATERFORD ADVISORS LLC
Relationships Beyond Investing



Start Up Retirement Plan Questionnaire

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There are key pieces of information needed when providing pricing and recommendations for a retirement plan. Please complete this form as accurately and completely as possible and return to us so that we can provide personalized recommendations for your company.

CONFIDENTIAL: Your information will be kept confidential and will never be provided to anyone without your consent.

Company Information:

Company Name: _____

Business Structure: _____

Ex.: C-corp, S-corp, P-ship, LLC, LLP, Sole Proprietor

Company Address: _____

Company Phone: _____

Company Fax: _____

Company Start Date: _____

Company EIN: _____

Company Fiscal Year End: _____

Primary Contact Name: _____

Contact Phone: _____

Contact Email: _____

Current Payroll Provider: _____

Have you ever had a retirement plan in the past: Yes or No? _____

If yes, please describe the plan type and when the plan was terminated or if it is still active: _____

Do you employ 1099 workers: Yes or No? _____

Do you have ownership in any other businesses: Yes or No? _____

If yes, please describe: _____

Plan Information:

Type of plan you're interested in? 401(K) SIMPLE IRA Other

How will you run your plan? Calendar Year Bus Fiscal Year

If fiscal year, what is the month end? _____

For what tax year do you wish to make your first contribution?

Current Year Following Year

Plan Goals / Objectives:

What is your primary interest in offering a retirement plan? (check all that apply): Attract and retain employees Help employees save for retirement Take advantage of pre-tax deferrals Take advantage of tax deductions for my business Satisfying a state retirement plan mandate

How important is employee participation in the retirement plan to you? (check one): Very Important Important

Neutral Not Important

What level of funds as the employer are you willing and able to contribute towards the company retirement plan for your employees on an annual basis? _____

Do you have any other notes or comments regarding a desired retirement plan that we should be aware of?

Confidential Ownership Census: add additional pages as necessary

First Name, Last Name	Title / Family Member Relationship	% Ownership	Date of Birth	Date of Hire	Annual Comp (please indicate from) W-2, K-1, Schedule C, etc.
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					
9.					
10.					

Confidential Employee Census: add additional pages as necessary

First Name, Last Name	Annual Hours of service	Date of Birth	Date of Hire	Date of Termination	Annual Comp (please indicate from) W-2, 1099
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2.					
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Thank you for taking the time to complete this important document.

Please return to Waterford Advisors by mail, fax (716) 580-3913, or email: cmm@waterfordadv.com.
If you have any questions, feel free to contact us at (716) 580-3906.



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