

## New Client Information Sheet

Name: \_\_\_\_\_

Home Address: \_\_\_\_\_  
\_\_\_\_\_

Phone Number: \_\_\_\_\_

E-mail address: \_\_\_\_\_

SIN: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Marital Status: \_\_\_\_\_

Spouse's Name: \_\_\_\_\_

Spouse's SIN: \_\_\_\_\_

Spouse's Date of Birth: \_\_\_\_\_

Children (names, DOB and gender):  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Home Buyers Plan repayment YES / NO

Property tax information provided YES / NO

Medical Expenses provided YES / NO

Qualify for Disability Tax Credit? YES / NO

University or College tuition provided YES / NO

Rent receipts provided YES / NO

Child Care receipts provided YES / NO

Do you own any foreign property worth more than \$100,000 CDN? YES / NO

Do you receive the Ontario Senior Home Owner's Property tax grant? YES / NO

Did you make RSP contributions? YES / NO

Are you a Canadian Citizen? YES / NO

Do you authorize the CRA to give your information to Elections Canada for the National Register of Electors? YES / NO

Are you enclosing last years' Notice of Assessment or tax return (T1)? YES / NO

Are we preparing an HST return? YES / NO

If so, provide access code \_\_\_\_\_

If not, what is your HST#? \_\_\_\_\_

Other information:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Referred by: \_\_\_\_\_

Price Quote: \_\_\_\_\_