

Name of Company:

Address:

Bus Phone No: Email:

Bus Fax No: Cell No:

NAME OF PRINCIPLE SHAREHOLDER(S):

Name: Name:

Address: Address:

Postal Code: Postal Code:

SIN # SIN #

Birth Date: Birth Date:

Phone No: Phone No:

Cell No: Cell No:

Email address: Email address:

Type of Business:

CRA Business No: Corporate Access No.

Date of Incorporation: Year End Date:

Type of Accounting System: Client will be providing online banking access?

Registered for GST? GST Filing Period: Who Files GST Return?

Registered for Payroll with CRA? Payroll Filing Period: Who Prepares Payroll?

Who Files the T4/T5/WCB Returns? Who Files the Corporate Annual Return?

Nature of our engagement:

How did you hear about us: