

## **New Client Intake Form**

\*If applicable, please bring a copy of your prior year tax return.

General Data:	
Name(s):	
Address:	
Birthday:	Occupation:
Taxpayer Cell:	Spouse Cell:
Taxpayer Email:	Spouse Email:
Taxpayer SSN#:	Spouse SSN#:
Reason(s) for Coming in:	
Entity Information:	
Legal Name:	
DBA:	
Address:	
Primary Business Activity/Type:	
Entity: Sole Proprietor / Partnership,	/ S-Corporation / C-Corporation / LLC
Date of Incorporation:	Tax ID:

For Internal Use: Engagement - Income Tax /Sales Tax /Payroll /Property /Bookkeeping /Accounting

