

# Payroll/Bookkeeping Setup Questionnaire

Please fill out this questionnaire and deliver through I & S Tax Service LLC secure [client portal](#), or email at [info@istaxservice.com](mailto:info@istaxservice.com).

## Company Name

\_\_\_\_\_

## Name(s) of business owner(s)

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

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

Email: \_\_\_\_\_

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

## Principal person to contact regarding payroll/bookkeeping services

First Name \_\_\_\_\_

Last Name \_\_\_\_\_

## Business Entity Type

Sole-Proprietor

LLC (single owner)

LLC (multi owner)

S or C corporation

Partnership

Other

## Date business or entity was formed

\_\_\_\_\_

## **Business Address**

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Street Address

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Street Address Line 2

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City

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State

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ZIP code

### **Which of the following is true?**

This business is a new employer and has not issued payroll in the past.

This business has issued payroll in the past.

Other

### **Does the business want to pay employees via direct deposit?**

Yes

No

## **Existing employers, please complete this section**

Federal EIN Number. If none, write "none".

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Federal EFTPS PIN and Password. If none, write "none".

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- I want to make the transition to working with I & S Tax Service LLC as seamless as possible. Before processing your payroll for the first time, please do the following:
- Notify your current provider
- Provide us with the information listed below
  1. Confirm payments of past taxes
  2. Ensure that your current provider does not file year-end reports on your behalf.

Client Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### **New employers, please complete this section**

Do you authorize I & S Tax Service LLC to set up incorporation documents on behalf of your company? The service fee is \$850.

Yes

No

Client Signature: \_\_\_\_\_

Do you authorize I & S Tax Service LLC to set up EFTPS tax payment accounts on your behalf?

Yes

No

Client Signature: \_\_\_\_\_

Do you authorize I & S Tax Service LLC to set up direct deposit of employee payroll on your behalf?

Yes

No

Client Signature: \_\_\_\_\_

Owner social security number (required for setup of EFTPS account).

\_\_\_\_\_

Owner's date of birth: \_\_\_\_\_

## Information required for providing payroll services

Business bank account number \_\_\_\_\_

Business bank routing number \_\_\_\_\_

Business bank name \_\_\_\_\_

Checklist of other information you will need to provide to us:

Name, address, and social security number of all employees

Copies of most recent two months bank statement for the business account for payroll

Completed federal form W-4 and state of Arizona form A-4.

Employee bank name, account number and routing number for payroll direct deposit

Voided check for payroll and tax account setup

YTD and QTD payroll summary

Copies of tax forms from the previous quarter (both federal and state)

Current earnings and deduction (hourly rate, vacation, sick, 401(k), etc.)

Desired pay period and pay date

You may attach relevant payroll documents to this questionnaire, here.