

## **NEW CLIENT**

**Tax Intake Form** 

Date Received:

Name:				Spouse:		
Birth Date:				Birth Date:		
Address:		City:		Postal Code:		
5.I.N			<del>-</del>	S.I.N		
Phone:			<del>-</del>	Phone:		
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Marital Status:	○ Single Did your mari	•	○ Separated ge?	lf an alaka.	Common Law Wido	
Dependants:	Did any rela	ntives live with	n you that we n	eed to consid	er?	$\bigcirc$ Y $\bigcirc$ N
Name			Date of Birth	(D/M/Y)	Relationship	Income
L						
Were you a first ti	me homebuyer?	?	Y N Y N		e provide details below.	
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