



Creekside Accounting Ltd.
 Chartered Professional Accountant
 225 – 1855 Kirschner Road, Kelowna, BC V1Y 4N7
 P: (236) 420 – 4801 | E: info@creeksideaccounting.ca

PERSONAL INTAKE FORM (FOR INDIVIDUALS AND NON-INCORPORATED BUSINESSES)

Primary Contact Information

First, Middle, Last Name			
Preferred Name		<input type="checkbox"/> Single	<input type="checkbox"/> Common-Law <input type="checkbox"/> Married
SIN		<input type="checkbox"/> Divorced	<input type="checkbox"/> Separated <input type="checkbox"/> Widowed
Date of Birth (M / D / Y)	Phone		
Occupation	Email		
Has your marital status changed? <input type="checkbox"/> No <input type="checkbox"/> Yes		Date of change:	Previous status:

Spouse / Partner's Contact Information

First, Middle, Last Name			
Preferred Name		<input type="checkbox"/> Single	<input type="checkbox"/> Common-Law <input type="checkbox"/> Married
SIN		<input type="checkbox"/> Divorced	<input type="checkbox"/> Separated <input type="checkbox"/> Widowed
Date of Birth (M / D / Y)	Phone		
Occupation	Email		
Will Creekside Accounting be filing a tax return for this person? <input type="checkbox"/> Yes <input type="checkbox"/> No		If no, what is their net income: _____	
Has their marital status changed? <input type="checkbox"/> No <input type="checkbox"/> Yes		Date of change:	Previous status:

Your Current Mailing Address

Street Address	
City, Province, Postal Code	

OPTIONAL ADD-ONS

Paper Copy of Tax Returns (per family)	\$25	<input type="checkbox"/> Yes <input type="checkbox"/> No	A printed copy of your tax returns for those not quite ready to trust PDFs. We've got you covered. Request paper documents to have it done the 'good old-fashioned way'.
Expedited Services (per return)	\$25	<input type="checkbox"/> Yes <input type="checkbox"/> No	Jump the line and have your taxes prepared more quickly. We'll prioritize your return to get you in and out more quickly.
No-Hassel Document Return (per family)	\$35	<input type="checkbox"/> Yes <input type="checkbox"/> No	We'll package and mail your personal tax return paper documents to you upon the completion of your services. Save time on pickup by having your documents mailed.
Audit Response Package (per family)	\$95	<input type="checkbox"/> Yes <input type="checkbox"/> No	When purchased in conjunction with tax return services, an Audit Response package provides first-responder services in the event of an audit.

REAL ESTATE

Have you sold a property in the past 18 months?		<input type="checkbox"/> Yes <input type="checkbox"/> No	(If yes, please provide the purchase and sale Statements of Adjustments)	
Was this home your principal residence (PR)?		<input type="checkbox"/> Yes <input type="checkbox"/> No	Did you own any other property during the time you are designating this home as your PR?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If you collect rental income, provide the address:				

MOVING

Previous mailing address (if moved in past 18 mo.)				
Did you move more than 40kms for work?		<input type="checkbox"/> Yes <input type="checkbox"/> No	Approximate date of move:	
Did you own the home you previously lived in and are now renting this home out and collecting rental income?				<input type="checkbox"/> Yes <input type="checkbox"/> No



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ANNUAL INQUIRIES

Do you own any foreign property or foreign investments (including US stocks) with a total cost of more than \$100,000?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Are you a Canadian Citizen?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Would you like to update your name, address, and date of birth with Elections Canada ?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

PERSONAL CONSIDERATIONS

Dependents (Children Under 18, Post-Secondary Students, Disabled Individuals, Elderly Parents)

Name	Birthdate (M/D/Y)	Relationship	SIN	Income

OTHER INFORMATION

Services Requested	<input type="checkbox"/> Personal Taxes <input type="checkbox"/> Small Business Taxes <input type="checkbox"/> Receipt Summary/Bookkeeping <input type="checkbox"/> Payroll <input type="checkbox"/> PST <input type="checkbox"/> GST <input type="checkbox"/> Other GST / CRA Number: _____ PST Number: _____
How would you like to authorize Creekside Accounting as a representative (required before services can begin)?	<input type="checkbox"/> Grant immediate access through your personal CRA MyAccount or by calling CRA (1-800-959-8281): <ul style="list-style-type: none"> Creekside Accounting Ltd.'s business number 755066693 Level 2 Access > No Expiry Date (please) <input type="checkbox"/> I will sign an authorization form (this may take several e-filing / re-signature attempts)

Bookkeeping Services Preferences (If You've Opted-In for Our Bookkeeping Services)

Bookkeeping program preference	<input type="checkbox"/> Sage50 <input type="checkbox"/> QuickBooks Online <input type="checkbox"/> Excel
Bookkeeping type	<input type="checkbox"/> Full-Cycle Monthly Bookkeeping (Bank Recs / Receivable / Payable Tracking – Higher Fees / Better Info) <input type="checkbox"/> Income / Expense Summary Only (No Bank Reconciliations or Receivables / Payables Tracking)

SERVICE PREFERENCES

What are your expectations for our services?	
How did you hear about us?	
Your preferred communication method:	<input type="checkbox"/> Phone <input type="checkbox"/> Email <input type="checkbox"/> Text

Any questions for the accountant? _____

Client Name: _____ Date: _____