



KBAUER LAW PLLC

Attorney At Law

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ITIN QUESTIONNAIRE / *Questionnaire ITIN*

Personal information / <i>Information</i>	
FIRST NAME / <i>Prenom</i>	=
LAST NAME / <i>Nom</i>	=
NAME AT BIRTH IF DIFFERENT/ <i>Nom de naissance si different</i>	=
FOREIGN ADDRESS (NO PO BOX) / <i>Address postale</i>	=
PHONE / <i>Telephone</i>	=
EMAIL / <i>email</i>	=
DATE OF BIRTH (month/day/ year) / <i>Date de naissance (mois/jour/annee)</i>	=
COUNTRY OF BIRTH / <i>pays de naissance</i>	=
MALE / FEMALE	=
COUNTRY OF CITIZENSHIP / <i>pays de citoyennete</i>	=
TYPE OF US VISA / <i>Visa americain</i>	=
LAST ENTRY DATE IN THE US / <i>Date de la dernière entrée aux USA</i>	=
PREVIOUSLY RECEIVED AN ITIN / <i>Detention d'un ancien ITIN</i>	=
ITIN FOR DEPENDENT / <i>ITIN pour personne à charge</i>	=

Reason for applying / <i>Raison de la demande de ITIN</i>	YES	NO
Filing US non-resident tax return / <i>Depot d'une declaration fiscale americaine</i>	<input type="checkbox"/>	<input type="checkbox"/>
Partner in a US partnership / <i>Associe dans une societe a plusieurs associes</i>	<input type="checkbox"/>	<input type="checkbox"/>
Receiving rental income / <i>revenu locatif</i>	<input type="checkbox"/>	<input type="checkbox"/>
Disposition of real estate property / <i>vente d'un bien immobilier</i>	<input type="checkbox"/>	<input type="checkbox"/>
Opening bank account / <i>ouverture d'un compte bancaire</i>	<input type="checkbox"/>	<input type="checkbox"/>

Other info / <i>Autres infos</i>	
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BY SUBMITTING THIS FORM, I CONFIRM THAT I DO NOT HOLD A US SOCIAL SECURITY NUMBER (**SSN**) AND THAT I AM NOT ELIGIBLE FOR A SSN. *Par la présente, je confirme que je ne détiens pas de SSN et que je ne suis pas éligible pour un SSN.*

Name, Signature, Date _____

Assisting Foreigners with their US tax obligations - Services fiscaux aux expatriés

Tax Professional

Chartered Certified Accountant

QuickBooks ProAdvisor

