Logo, company name

Description automatically generated

**CLIENT PROFILE - INTAKE FORM**

**Company Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Please provide as much information as you could to help us have the best understanding of your business and customize our product/ service to match with your situation.

**1. What is the full legal name of your business?**

**2. Primary address for business**

* Address Line 1
* Address Line 2
* City
* Province
* Postal Code
* Primary phone number for business
* Fax number

**3. Authorized Contact Information**

Primary contact #1

* First
* Last
* Title
* Cell Phone
* Email

Primary contact #2

* First
* Last
* Title
* Cell Phone
* Email

**4. Business type information**

* Sole proprietorship
* Partnership
* Corporation
* Cooperative
* Non-Profit Organization
* Others (please specify)

**5. Business owner information**

* Name of business owner #1
* Percentage of ownership?
* Name of business owner #2
* Percentage of ownership?
* Name of business owner #3
* Percentage of ownership?

**6. Briefly describe the products and services that your business sells**

**7. What is the business number (BN)?**

**8. On what basis do you record your business revenue and file your tax returns?**

* Accrual
* Cash
* Not sure

**9. What is the last month of the tax year for your business (example: December)?**

**10. What year was the last tax return filed for your business?**

(\*Please send us a copy of your last tax return for our record)

**11. Does your business use QuickBook?**

* Yes
* No

**12. If yes, what version of QuickBook does your business use?**

* Desktop
* Online

**13. How many checking accounts does your business have?**

Bank 1

* Name of Bank #1
* Account number #1
* Is on-line access available?

Yes

No

Not sure

* When was the last month/ year that this account was reconciled?

Bank 2

* Name of Bank #2
* Account number #2
* Is on-line access available?

Yes

No

Not sure

* When was the last month/ year that this account was reconciled?

Bank 3

* Name of Bank #3
* Account number #3
* Is on-line access available?

Yes

No

Not sure

When was the last month/ year that this account was reconciled?

**14. How many credit cards does your business have?**

Card 1

* Name of Bank #1
* Last 4 digits of credit card #1
* Is on-line access available?

Yes

No

Not sure

* When was the last month/ year that this account was reconciled?

Card 2

* Name of Bank #2
* Last 4 digits of credit card #2
* Is on-line access available?

Yes

No

Not sure

* When was the last month/ year that this account was reconciled?

Card 3

* Name of Bank #3
* Last 4 digits of credit card #3
* Is on-line access available?

Yes

No

Not sure

* When was the last month/ year that this account was reconciled?

**15. Does your business co-mingle business / personal revenue and expenses in one account?**

* + Yes
  + No
  + Not sure

**16. How careful are you to separate business income & expenses from personal transactions?**

* + Very careful
  + Not very careful
  + Never separate. Personal and business transactions are inter-mingled.

**17. Approximately how much revenue did your business generate last year?**

**18. Does your business have a sales forecast?**

* Yes
* No

**19. Do you plan your business to generate more sales in the coming year?**

* Yes
* No
* Not sure

**20. Do you feel that your business has controlled its costs/ expenses properly?**

* Yes
* No
* Not sure

**21. Does your business belong to any small business networking groups?**

* Yes
* No

**22. If you or your business belongs to any small business networking groups, please list them:**

**23. How many full-time employees does your business have?**

**24. How many part-time employees does your business have?**

**25. How often are your employees paid?**

* Weekly
* Biweekly
* Twice monthly
* Monthly
* Other (please specify)

**26. Do you run payroll internally or use an outside payroll service?**

* Internal Process
* Outside payroll service

**27. Does your business sell products and services that are taxable?**

* + Yes
  + No
  + Not sure

**28. If yes, how often do you remit sales taxes?**

* Monthly
* Quarterly
* Annually
* Not sure

**29. Does your business accept credit cards as payment for products and services?**

* + Yes
  + No

**30. Is your business licensed professionally?**

* Yes
* No

**31. If your business is licensed professionally, please explain the type of license that you have:**

**32. Is your business insured?**

* + Yes
  + No

**33. Does your business have unpaid loans (other than credit cards)?**

* Yes
* No

**34. Does your business have access to a line of credit?**

* Yes
* No
* Not sure

**35. Any other information of any of the answers above or any notes about your business or a special situation that you would like for us to know about**

Thank you for choosing Willow Point Financial Services Ltd. for bookkeeping service. We make sure to provide the best service that worth every of your penny!