Client Intake Checklist (Fillable)

Client Type

Individual Taxpayer

Business / Self-Employed

Client Information

Client Name:

SSN / ITIN:

Tax Year:

Phone Number:

Required Documents

Government-issued Photo ID

Social Security Card / ITIN

W-2 / 1099 Forms

Dependent Documents (if applicable)

Client Certification

I certify that the information and documents provided are true and correct.

Client Signature:

Date:

Office Use Only

Preparer Name:

Notes:

Return Reviewed (Initials):