

EPCO Tax & Accounting New Client Intake Sheet

We will require a copy of your Social Security Cards and Driver's License before e-filing.

Taxpayer (Taxpayer #1/Husband)

Name: _____

Birth Date: _____

Social Security #: _____

Street Address: _____

City _____ Zip: _____

Cell Phone: _____

Best time to call: _____

Email: _____

Dependents:

Name: _____

Date of Birth: _____

Social Security #: _____

Relationship: _____

Can dependent be claimed by anyone else?

Y or N : Who? _____

Name: _____

Date of Birth: _____

Social Security #: _____

Relationship: _____

Can dependent be claimed by anyone else?

Y or N : Who? _____

Did the child you are claiming as a dependent reside with you at least 183 Nights of 2024 (more than half the year)?
Y or N

Did you provide at least 50% of their living expenses? *Y or N*

Personal Bank account:

New Routing #: _____

New Account #: _____

Taxpayer (Taxpayer #2/Wife)

Name: _____

Birth Date: _____

Social Security #: _____

Street Address: _____

City _____ Zip: _____

Cell Phone: _____

Best time to call: _____

Email: _____

Refund: Direct Deposit or Paper Check

Form of Tax Return copy: Digital Return or Paper Return

Business Name: _____

Address: _____

Phone Number: _____

City _____ Zip _____

Bring Documents required:

Balance sheet/Income statement/Trial balance/Payroll summary/Mileage Log

Equipment Purchased: *Y or N* (Provide Receipts)

Equipment Sold: *Y or N* (Provide Dates and Amounts)

Business Bank Account:

New Routing #: _____

New Account #: _____

EPCO Tax & Accounting Client Check Sheet

We will require a copy of your Social Security Cards and Driver's License before e-filing.

Checklist:

Did you Rent or Own?

Own: (Provide 1098 Mortgage Statement)

Was your mortgage used to buy or improve your home? *Y or N*

Did you make Energy Efficient household improvements in 2024? **(Provide Receipts)**

Y or N

List what: _____

Did you refinance a home this year? *Y or N*

Rent:

Landlord's Name: _____

Address: _____

Phone: _____

Rent/Month: _____

How many months lived there in 2024? _____

Childcare Expenses: (Provide Childcare letter)

Provider's Name: _____

Address: _____

TID#: _____

Did child attend college? **(Provide Form 1098T)**

Y or N

Expenses: *Y or N* **(Provide documentation)**

Did student claim themselves on a return?

Y or N

Did child attend a private school / homeschool?

Y or N

Income:

Any foreign accounts over \$10K? *Y or N*

Do you have investments? **(Provide Broker Statements/1099R):** Retirement / Pension / Other

Do you have 529 plans? *Y or N* **(Provide 529 Statement)**

Did you do any virtual currency trading? *Y or N*

Did you receive a **1099 K**? *Y or N*

What activity was it generated from?

Did you have any cancellation of debt during 2024? **(Provide 1099C)** *Y or N*

Rental Property:

Monthly income: _____

Did you have expenses: *Y or N* **(Provide documents)**

of days rented _____

of days available for rent _____

of days under repair _____

of days of personal use _____

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Offices in Fort Wayne and Huntington