

Personal Tax Client Intake Form

~ Dependent over 18 living with parents ~

Name:	SIN:	D.O.B.:
First Time Filer? Y / N (If yes, please provide middle name)		
Address:	City:	Province:
Email:	Tel:	Postal Code:

Please circle one

Did you own any foreign income generating assets at any time in the tax year or any other foreign assets with a combined cost of more than \$100,000? (If yes, fill out supplementary form 2)	Yes	No
Are you Canadian Citizen?	Yes	No
May CRA provide your name, address and SIN to Elections Canada?	Yes	No

OTHER INFORMATION

How would you like your T1 returns?	PDF	Paper
Do you want email notifications from CRA? (If yes, we will use email provided)	Yes	No
Are you approved for the disability tax credit? (If yes, please provide T2201 approval letter)	Yes	No
Do you have a tax-free savings account?	Yes	No
Did you contribute to a First Home Savings Account?	Yes	No
Do you have an incorporated company with us?	Yes	No
Company name:		

Sole Proprietors

Are you GST registered?	Yes	No
Does your business earn income from a website? Website name: % of gross income generated from website:	Yes	No
Did you use your personal vehicle for business purposes? You must provide a copy of the vehicle log book containing a minimum of 3 months worth of logs.	Yes	No

I acknowledge that:

1. I must pick up all returns and sign the e-file authorization(s) before my return(s) will be transmitted.
2. All services must be paid in full upon pick-up.
3. OTH will email an invoice once my personal return is complete.
Email to use: _____
4. OTH does not guarantee "on time completion" for returns dropped off after April 15.
5. Changes made to returns after completion will have an additional cost of \$30.00.

Signature: _____

Date: _____