

NEW CLIENT INTAKE FORM

Full Legal Name: _____ SIN: _____

Date of Birth: _____ Phone: _____

Marital Status: _____ Email: _____

Spouse, if applicable:

Full Legal Name: _____ SIN: _____

Date of Birth: _____ Email: _____

Full Mailing Address: _____

Full Given Name of Children/Dependents (if appl.)	F M	Date of Birth	SIN

Submit back to KeyPoint Business Services, along with:

- ☐ 2023 Tax Return (if available)
- ☐ 2024 Income Tax Return – Checklist
- ☐ Copies of Receipts (For reasons listed on the Checklist)

Process:

- Initial Submission **taxes@keypointbusiness.ca**
- Preparation By assigned tax preparer
- Review By another tax preparer
- 2nd Review By another/Laura Robertson-Binder
- Email Send Out Will receive T1 Summary, T183 for Signature
- Invoice Sent Out Check your junk box if nothing arrived promptly after email above.
- Filing Once a signed T183 and payment is received.

PLEASE DO NOT SUBMIT UNTIL YOU HAVE EVERYTHING TOGETHER

Initial Submission: **taxes@keypointbusiness.ca**

E-Transfer Payments **info@keypointbusiness.ca**