OLAFSON & JONES
Personal Income Tax Information Sheet

New Client

Important : If possible, please provide a copy of your **Notice of Assessment** or **Personal Income Tax Return** from the prior year and, if applicable, the latest Instalment Payment Summary. We also require you to **sign a T1013 (Authorizing a Representative)**.

ELECTRONIC DELIVERY? YES NO

DATE SUBMITTED: _____

How many returns are we preparing? _____ Year (s)?_____

Please fill out below:

Full Name: _____

Address:_____

Main phone number: _____ Type: _____

Secondary phone number: _____ Type: _____

Email: _____

Preferred method of contact (circle one): Main phone number Secondary phone number Email

Date of Birth: _____ Social Insurance Number (SIN) : _____

1) Has your primary residence changed in 2022? YES NO

If yes , please provide your: date of move: _____

New address:_____

_____

Sale price and original year of purchase (if you owned previously)_____

2) Are you a Canadian citizen? _____ If you answered no, please indicate country of citizenship_____

3) Marital Status: Single Common - Law Married Separated Divorced Widowed

4) Did your marital status change during the 2022 taxation year? Yes No

If yes, please indicate the change and date of change:_____

(continued…)

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4) If applicable

Spouse's Name:_____

Spouse's Date of Birth:_____ SIN:_____

5) If we are NOT preparing a return for your spouse or common–law partner, please provide the net income amount from his/her return : _____

6) If applicable Please list the full names, dates of birth and SINs of all children and / or dependents:

_____

_____

_____

7) Are you self employed? Yes No

IF YES - Do you use a home office for your business? Yes No

What is the area of home used for business (sq. feet): _____

What is the total area of the home (sq. feet): _____

- Are you registered to file G.S.T? Yes No
- Are we preparing a G.S.T. return for this taxation year? Yes No
- Have you provided us with the following slips? Please check all that apply:

_____Hydro _____Insurance _____Maintenance _____Mortgage Interest _____Property Taxes

8) Have you provided us a copy of your Notice of Assessment or Personal Income Tax Return from the prior year? Yes No

Notes to preparer:

_____

_____

_____

_____

_____

_____

_____

_____

_____

Please sign the CRA Authorizing a Representative form attached to this form

Authorization/Cancellation request – Signature page

- Print this page and have it signed and dated by the taxpayer or legal representative
- Retain a copy of the signed and date signature page in your files for six years from the date that this information is transmitted to the CRA. Do not send the signature page by mail or fax unless request to do so.

Representative information

REP ID

First name :

Last name:

Group ID

Group name

Business number (BN)
829399955

Business name (BN)
Olafson & Jones

Taxpayer information

SIN

First name :

Last name:

Authorization information

Level of authorization: Level 2

Expiry date:

Cancellation information

☐ Cancel **all** representatives

☐ Cancel specific representative

Rep ID

First name :

Last name:

Group ID

Business number (BN)

Business name (BN)

Signature information

☐ Legal representative signature

Name of taxpayer or legal representative:

Certification

By signing and dating this page, you authorize the Canada Revenue Agency to interact with and/or cancel the representative(s) mentioned above.

Signature:

X

Signature of taxpayer or legal representative

Date: