



Basic Information Form

Please fill in the areas that apply to you and email the completed form to <info@flashcpa.ca>.

1. Personal Information

Contact

Name:

Phone Number :

Email:

Do we have your correct/updated information?

- I am a returning client.
 - No changes to information for me or my family.
 - Some info has changed. New info below.

I am a new client. Information below.

	You	Spouse/ Partner	Dependent 1	Dependent 2	Dependent 3	Dependent 4
First Name						
Last Name						
Gender (M/F)						
SIN						
Address	(Unit#, St.#, St. Name)					
	(City, Province, Country)					
Postal code						
Relationship (only for dependent)	/	/				
Birthday (YYYY/MM/ DD)						
Net Income Zero? (Y/N)						

Note: Please provide details in 4. Remarks section if you have more than four dependents

Somebody (in the above table) has passed away:

Who? _____

Date of death (YYYY/MM/DD): _____

Please provide a copy of the death certificate, and a full copy of the last will and testament. Also see Section 3.

2. Correspondence with CRA

- I am a returning client - you have access to my online record.

- I am a new client.
 - Please provide a full copy of last year' s tax return. IMPORTANT - this includes full T2125 if you have self-employed income

 - We will ask you to sign on T1 Authorization Form. [Note: For deceased taxpayers, the T1 Authorization Form must be signed by ALL executors named in the will.]

3. Country of citizenship/residence/work

	Yourself	Your Spouse/ Common Law Partner
Are you a Canadian citizen? (Y/N)		
If you became or ceased to be a Canadian resident in 2019, enter date of entry or departure (YYYY/MM/DD)		
For Canadians, do you authorize CRA to provide your details to Elections Canada? (Y/N)		
Do you own any "specified foreign property" with cost > \$100,000? (Y/N)		

4. Remarks
