Seiler, Singleton & Associates, PA

New Client Application

Taxpayer Name: _____ Date of Birth: _____ Occupation: _____

Taxpayer Cell Phone (Required): _____ Taxpayer Email (Required): _____

Spouse Name: _____ Date of Birth: _____ Occupation: _____

Spouse Cell Phone (Required): _____ Spouse Email (Required): _____

Street Address: _____

City: _____ State: _____ Zip: _____ County: _____

Mailing Address (If different): _____

City: _____ State: _____ Zip: _____ County: _____

Dependents Name(s), Date(s) of Birth, and Relationship:

Dependent Name: _____ Date of Birth: _____ Relationship: _____

Dependent Name: _____ Date of Birth: _____ Relationship: _____

Dependent Name: _____ Date of Birth: _____ Relationship: _____

Dependent Name: _____ Date of Birth: _____ Relationship: _____

Attorney: _____ Estate Planner: _____

Bank/Banker: _____ Referred By: _____

Current CPA / Tax Preparer: _____

What are you looking for in a new CPA? _____

_____

Seiler, Singleton & Associates, PA

New Client Application

☐ I am a business owner ☐ I am starting a new business ☐ I am not a business owner

Primary Business Name: _____

Nature of Business: _____

Annual Gross Receipts (anticipated for current year): _____

Business Organization (Corp, Partnership, etc.): _____

Number of owners: _____ Primary owners / decision makers: _____

Current Accounting Software: _____

What are your primary concerns about your business? (Choose two)

☐ Business Growth ☐ Reducing Taxes ☐ Business Succession

☐ Cash Flow ☐ How am I doing? ☐ Budgeting

What services are you interested in our firm providing?

☐ Income Tax Preparation ☐ Income Tax Planning ☐ Sales Tax Preparation

☐ Property Tax Listings Preparation ☐ Heavy Highway Vehicle Use Return Prep

☐ Invoicing Customers ☐ Depositing Checks ☐ Financial Statement Preparation

☐ Payroll Preparation ☐ Payroll Tax Return Preparation ☐ Preparation of 1099s

☐ Bank Account Reconciliation ☐ Payments of Venders ☐ Accounts Payable Management

☐ Business Succession ☐ Business Budgeting and Forecasting ☐ Business Retirement Planning

In order to provide a quote for services, we require copies of your last three years' tax returns and a recent backup of your QuickBooks company data.

In order to provide bookkeeping and payroll services to your business, we require online banking access to your business bank accounts.

* * * * * * * *

Our services are dependent on our ability to effectively communicate to you. These communications can come in the form of emails and text messages. By signing this form, you agree to give us permission to contact you by email or text message.

Taxpayer Signature: _____ Spouse Signature: _____