

**NEW CLIENT FORM – INDIVIDUAL**

	<b>Taxpayer</b>	<b>Spouse (if applicable)</b>
Name:		
Social Insurance Number (SIN) or similar ID number:		
Address:		
City:		
Province / State:		
Postal Code / Zip Code:		
Country:		
Home Phone:		
Work Phone:		
Cell Phone:		
Email Address:		
Date of Birth (yyyy-mm-dd):		
Martial Status:		
Has your martial status change recently? (Y/N) If yes, please provide details:		
Do you have Canadian citizenship? (Y/N):		
Do you authorize CRA to release your information to Elections Canada? (Y/N):		
Do you own foreign assets worth more than CAD \$100,000? (Y/N):		
<b>Do you have dependents/children?</b>	<b>Child 1</b>	<b>Child 2</b>
Name:		
Social Insurance Number (SIN) or similar ID number:		
Date of Birth (yyyy-mm-dd):		
Relationship to you:		

Please return form to Burlington Tax Services by email at [info@butx.com](mailto:info@butx.com) or by fax at (905) 315 1846 or by mail at 2179 Winding Way, Burlington, Ontario, Canada, L7M 2X2. Thank you.