

New Business Client Form (CORPORATION)

Legal name of the corporation		Registration type			
		🗆 Federal 🛛 🗆 Provincial			
Operating name, if different from legal name	Date of incorporation	Corpora	te fiscal year end		
Provincial corporation number		Business number (RC)			
HST Registered 🗆 Yes 🗆 No		If YES, indicate the filing period 🛛 Annually 🗆 Quarterly 🗆 Monthly			
Effective date of registration		HST filing year-end			
Would Numeracy Accounting be filing HST return?		If NO, would you like to learn about the benefits? \Box Yes \Box No			
Do you have a payroll account?	P Yes □ No Would Numeracy Accounting be running payroll for the business □ Yes □ No				
If YES, how many employees:		Would Numeracy Accounting be preparing T4s and T4 Summary? \Box Yes \Box No			
Does the business have subcontractors:	□ Yes □ No				
Please list the corporation partners:					
FULL NAME	% OF OWNERSHIP	EMAIL	COMPANY TITLE		
Describe the main activities of the business:					
MAIN ACTIVITIES		PERCENTAGE			

Business information:

Does the business operate an office out of the home?	n Yes n No	If yes, indicate total sq ft of home:
Address:		
Do you have a secondary location?	🗆 Yes 🗆 No	Indicate total sq ft of office:
Address:		

Please list any bank account that the corporation owns:

INSTITUTION	ACCOUNT NUMBER	CHQ / SAV / CC / LOC		

Does the corporation OWN / LEASE / FINANCE a vehicle?	🗆 Yes 🗆 No	
If NO, provide business km driven on personal vehicle(s)	km	If YES, provide bill of sale.

YEAR	MAKE	MODEL	OWNED	LEASED	FINANCED

Please provide Articles of Incorporation and last filed Corporate Tax return (T2)