

New Client(s) Personal Information

1. Basic Information

	Taxpayer 1		Taxpayer 2
First Name	<hr/>	First Name	<hr/>
Last Name	<hr/>	Last Name	<hr/>
2. SIN	<hr/>	SIN	<hr/>
3. Date of Birth	<hr/>	Date of Birth	<hr/>
4. Address	<hr/>	Address	<hr/>
5. Email	<hr/>	Email	<hr/>
6. Tel. No.	<hr/>	Tel. No.	<hr/>
7. Marital status			
	Single	Married	Common-Law
	Separated	Divorced	Widowed

Please provide your prior year T1(s).