

Heath, Fania & Co., PC

New Client Data – Business

Client ID: _____

Business Name: _____ FEIN or SSN: _____

Primary Owner(s): _____ SSN: _____ DOB: _____

Primary Owner(s): _____ SSN: _____ DOB: _____

Billing Address _____ Physical Address _____ County: _____

Phone (office) _____ (fax) _____ (cell) _____

Email Address: _____

Primary Contact: _____

Description of Business: _____ how long in business? _____

Type of Organization: ___ Sole Proprietor ___ Partnership ___ Corporation Fiscal Year End: _____

Approximate Sales Volume: \$ _____

Number of Employees: _____ Do you provide insurance coverage to employees? ___ Yes ___ No

Is Your Business within SC Municipal City/Town Limits? YES NO Which City/Town? _____

Are you a SC Resident? ___ YES ___ NO How long have you lived in SC? _____/_____ (years/months)

Description of Services desired: (please check all that apply)

- ___ New Business Startup ___ Bank Reconciliation's
___ Tax Preparation ___ Accounts Payable
___ Financial Statement Preparation ___ Audit
___ Sales Tax Return ___ Business Consulting Services
___ Litigation Support

Other issues to be addressed: _____

If you expect to have payroll, please complete the following:

Anticipated date of 1st payroll _____ Anticipated number of employees _____
Payroll schedule: Weekly Bi-Weekly Semi-Monthly Monthly (circle one)
Would you like us to prepare your payroll? _____
Would you like us to prepare your payroll deposits? _____
Would you like us to calculate your 401K or Simple? _____
If you will prepare your own payroll, do you need assistance with payroll quarterly or annual reporting requirements?

Does your business have a qualified deferred compensation plan? ___ YES ___ NO

Who referred you to us? _____ Attorney: _____

Prior Accountant: _____ Banker: _____

Date: _____

(Signature of Owner or Partner)

For Office Use Only: Please prepare:

- ___ Application for Federal ID Number (SS-4)
___ Application for S-Election (Form 2553)
___ Application for SC Business License (SCTC-111) ___ Sales Tax ___ Withholding (if W/H UCE-151 also)
___ Need POA for ___ Federal (2848) ___ State (SC2848) or State of _____

Documents needed: ___ Articles of Incorporation/Organization ___ Corp/HOA By-Laws ___ Stock Certificates
___ Registration Stmt w/ State (Tax Exempt) ___ Copies of Lease(s) ___ Loan Documents
___ Closing Stmts for Real Estate ___ Copy of Prior Year Tax Returns (Bus & Ind)

Set up Client: ___ Practice CS ___ Ultra Tax New Client Listing for Year ___ File Cabinet
___ Constant Contact ___ Engagement Letter