

# CLIENT BUSINESS REGISTRATION/ INFORMATION SHEET



## GTP Tax Services

73 OLD KINGSTON RD.  
 AJAX, ONTARIO L1T 3A6  
 PHONE (416) 579-9959  
 OFFICE (905) 239-0410  
 WEB ADDRESS: [WWW.GTPTAX.COM](http://WWW.GTPTAX.COM)  
 EMAIL: gtpfax@gmail.com

<b>DATE</b>	<b>TENDING ASSOCIATE</b>

### BUSINESS INFORMATION

<b>LEGAL NAME OF BUSINESS</b>		<b>CURRENT ADDRESS</b>	
<b>ESTABLISHMENT DATE</b>			
<b>BUSINESS NUMBER</b>			
<b>BUSINESS PHONE</b>		<b>FAX</b>	
<b>MOBILE PHONE</b>		<b>EMAIL</b>	
<b>OWNER/ DIRECTOR(S) NAME:</b>		<b>WORK PHONE</b>	
<b>FILING STATUS</b>	SOLE PROPRIETOR ____ PARTNERSHIP ____ INCORPORATED ____		
<b>REFUND TYPE</b>	CHECK ____ DEBIT CARD ____ DIRECT DEPOSIT ____		

### DIRECTOR/ OWNER INFORMATION

<b>NAME</b>		<b>CURRENT ADDRESS</b>	
<b>DATE OF BIRTH</b>			
<b>SOCIAL INSURANCE NUMBER</b>			
<b>TITLE</b>		<b>FAX</b>	
<b>HOME PHONE</b>		<b>EMAIL</b>	

### INCOME STREAMS

<b>LEGAL NAME OF BUSINESS</b>		
<b>ESTABLISHMENT DATE</b>		
<b>BUSINESS NUMBER</b>		
<b>BUSINESS PHONE</b>		

### PAYMENT INFORMATION – (Office Use Only)

<b>PAYMENT TO</b>		<b>PAYMENT DATE</b>	
<b>RECEIPT NUMBER</b>		<b>AMOUNT PAID</b>	\$
<b>PAYMENT METHOD</b>			
<b>RECEIVED FROM</b>		<b>RECEIVED BY</b>	
<b>ACCOUNT INFO</b>		<b>PAYMENT PERIOD</b>	
<b>ACCT BALANCE</b>	<b>THIS PAYMENT</b>	<b>BALANCE DUE</b>	<b>FROM</b>
\$	\$	\$	THROUGH

<b>TAXPAYER SIGNATURE</b>		<b>DATE</b>	
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<b>PARTNER'S SIGNATURE</b> <small>(If Applicable)</small>		<b>DATE</b>	
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