

# **NEW CLIENT INTAKE FORM**

## **PLEASE CHECK ALL THAT APPLY:**

- Single  Head of Household (unmarried with dependent(s) in the house)  
 Married filing Joint  Married but filing Separate  Widowed during the tax year. Date: \_\_\_\_\_  
 Lived separate from spouse for last 6 months of year or more  I have a child that I claim on my return and will fill  
 Divorced during the tax year. Date: \_\_\_\_\_

**NAME:** \_\_\_\_\_ Soc. Sec. Number / ITIN: \_\_\_\_\_

Full Time Student  Blind  Active Military  Unemployed  Occupation: \_\_\_\_\_

Date of Birth: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Did you get health insurance from the Marketplace? **Y** \_\_\_\_ **N** \_\_\_\_

**SPOUSE'S NAME:** \_\_\_\_\_ Soc. Sec. Number / ITIN: \_\_\_\_\_

Full Time Student  Blind  Active Military  Unemployed  Occupation: \_\_\_\_\_

Date of Birth: \_\_\_\_\_, \_\_\_\_\_. Did you get health insurance from the Marketplace? **Y** \_\_\_\_ **N** \_\_\_\_

**ADDRESS:** \_\_\_\_\_ Apt./Floor: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Email Address: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Other Phone #: \_\_\_\_\_

## **QUESTIONS:**

Did you have a new dependent (a baby born) in your household during 2023? **Y** \_\_\_\_ **N** \_\_\_\_

How did you hear about us? \_\_\_\_\_

Do you intend on filing an extension? **Y** \_\_\_\_ **N** \_\_\_\_ *If yes, there is a \$75.00 fee to file an extension, you will have until 10/15/2024 to file your individual tax return.*

*I am paying for the time and expertise of a tax professional. I understand that I will be charged for the preparation of this return. I understand that my return will be prepared based on the information I provide it. I am solely responsible for the accuracy of the information above and for maintaining the records to support it.*

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_, 20 \_\_\_\_.