2024 NON-INDIVIDUAL CLIENT INFORMATION FORM



Required Information

Entity:		Corporate, Non-Profi	t, Other, Partnership, Trust & Estate, Trust Inter-Vivos
Name:			BN# / Acct#:
Mailing Name: (replaces above Name on Invoices & Statements)			
Salutation: (name of main contact Individual)			
Partner:		Industry:	(AG, EST, FIN/INSUR, GOV, INV, MFG, NPO, PREC, PHARM, PREC, PRO, RENT, REST, RET, SERV, TRADE, Trust)
Manager:			
Mailing Address:			Physical Address: (if different)
Addressee Name: (name for postal purposes; ie. Executor, etc)			
Contact Numbers:	Mobile:		Home:
	Work:		Other:
E-Mail(s):			
NTR Client	Review Client	Audit Client	Tax Consulting T2 Returns
T3 Returns	T4 slips	T5 slips	Sales Tax Return HST Filing Freq:
Tax Yearend:			Client Type:
Client From: (MM/DD/YYYY) current date used if none specified			Client Sub Type: see iFirm for Client Sub Type Category list
Invoice & Statement	ts: Email I	Mail	CLIENT TYPE
Billing Group: New Existing			11 - Agriculture, Forestry, Fishing and Hunting21 - Mining, quarrying, and oil and gas extraction
Contact Group: New Existing			22 - Utilities
Notes:			 23 - Construction 31-33 - Manufacturing 41 - Wholesale Trade 44-45 - Retail Trade 48-49 - Transportation and Warehousing 51 - Information and Cultural Industries 52 - Finance and Insurance 53 - Real Estate and Rental and Leasing 54 - Professional, Scientific and Technical Services 55 - Management of Companies and Enterprises 56 - Administrative and Support Wate
Optional Information			56 - Administrative and Support, Waste Management and Remediation Services
Accounting Software:			61 - Educational Services 62 - Health Care and Social Assistance
Bookkeeper Name:			71 - Arts, Entertainment and Recreation
Separate Portal Access? Yes No			72 - Accommodation and Food Services 81 - Other Services (except Public Administration)
Bookkeeper Email:			91 - Public Administration