

Corporate Client Intake Form

| 1. General Information | | |
|--|-------------------------|--------------|
| Business Name: | Related Companies: | |
| Physical Address: | | |
| City: | Province: | Postal code: |
| Mailing Address: | | |
| City: | Province: | Postal code: |
| Main Phone: | Fax: | |
| Website: | CRA Business Number #: | |
| Contact Name: | | |
| Title: | Email: | |
| Work Phone: | Cell Phone: | |
| 2. Business Information | | |
| Bank: | Time with current Bank: | |
| Types of Accounts: | Year End Date: | |
| Primary Banking Officer: | | |
| Primary Legal Counsel: | | |
| Law Firm of Counsel: | | |
| Current Financial Advisor(s): | | |
| Type of Relationship: | Level of Satisfaction: | |
| Have you informed your previous Accountant/Advisor that you are meeting with us? | | |
| Do you have an outstanding balance with your previous Accountant/Advisor? | | |
| | | |



| How long have you been in business? |
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| Is the business profitable? |
| If not, how are you covering operations and cash flow? |
| What accounting system do you currently use in your business? |
| Are you happy with your current accounting system? Why or why not? (eg. does it give you information to help manage your business and maximize profits?) |
| 3. Services |
| How did you learn about us? |
| Is there a specific reason for which you contacting us? |
| What do you expect from your accountant/advisor? |
| What are your most important service issues? |
| What is your annual accountant/advisor budget? |
| How often would you like to meet with your accountant/advisor? |
| Do you expect your accountant/advisor to contact you unilaterally throughout the year? |
| What is your expected turnaround time for preparation of reports received by our firm? |
| Please list any other items that you feel strongly about that we have not covered in this questionnaire: |



