

BUSINESS INFORMATION

Company Name (legal): _____
Address: _____
Nature of Business: _____ Business #: _____
Phone: _____ Years in business: _____
Email: _____ # of Employees: _____
Contact Person: _____ Fiscal Year End: _____
Date of Incorporation: _____
Business Entity: Proprietorship Corporation Partnership
 Not-For-Profit Other: _____

OWNER/PARTNER/PROPRIETOR INFORMATION:

Name: _____	Name: _____
Title: _____	Title: _____
Address: _____	Address: _____
Phone: _____	Phone: _____
Email: _____	Email: _____
% of ownership: _____	% of ownership: _____

BOOKKEEPING INFORMATION:

Current bookkeeping software: _____
Current Bookkeeper: _____
Do you have payroll?: _____ Are your deduction payments current?: _____
Do you track inventory?: _____
How many business Bank accounts do you have?: _____
How many business Credit Card Accounts?: _____
How often do you report HST?: Annually Quarterly Monthly Other: _____
How do you pay HST?: Paper Remittance Online bank CRA account Other: _____
Is your HST filing current?: _____
Are your tax returns current?: _____
Do you want to expand or reduce the business?: _____
Do you have an accountant for year end taxes?: _____
If not, would you like Vision to file your taxes?: _____
How will you send us your paperwork?: Dropped off Mailed Emailed Other: _____
What % of work would you like Vision to take on?:
 10% = You do most bookkeeping, Vision does specific things like HST or Payroll.
 30% = You are involved in the bookkeeping, Vision reconciles accounts, calculates HST, and completes Payroll.
 60% = You organize paperwork and write cheques, Vision does most bookkeeping.
 90% = You send paperwork and Vision does every bookkeeping aspect needed.

SIGNATURE: _____

DATE: _____