New Client Details Form & Engagement Agreement – Company

We would appreciate you taking the time to complete the following details. If you have any questions in relation to the form, please do not hesitate to ask for assistance.

	Current Details						
Company (or Trustee) Name:	(Registration Date:)	ACN: ABN: TFN:					
Business Name:							
Registered Office:							
Principal Place of Business:							
Nature of Business:							
Which Accounting Software are you currently using for your business?	☐ Xero ☐ MYOB ☐ Reckon ☐ Quickbooks We recommend you to use Xero for your business.	☐ SimpleFund360 ☐ Sage ☐					
Business Telephone & Email:							
Web Site:							
Director/s Names: Surname							
First Names							
Title & Capacity							
Date of Birth:							
Tax File Number:							
Director ID (15-digit)							
Postal Address:							
Residential Address:							
Mobile Phone:							
Home Telephone:							
Email Address:							
What kind of services would you like to appoint?	☐ Tax Return ☐ BAS ☐ Bookkeeping ☐ Registered Office	Set-up Company/ Trust All Tax Compliance ASIC agent					
Are there any special instructions you would like us to note when contacting you?							
This agreement will be effective immediately between company, directors, and Christine Lee Mobile Tax Agent when you sign or fill out this form and for future years unless [I/we] advise you of any change in our arrangement.							
Director's Signature/s:		Date:					

Christine Lee Mobile Tax Agent – PO Box 113, Mernda, Vic 3754 Mobile: 0433 158 936 Email: christine@christinelee.com.au

Accountant to complete (** to be done at interview)									
Client Code:									
Partner:									
Manager:									
Accountant:									
** Preferred Billing Client:				Client Code: Linked at: Invoice / Timesheet					
Fee Quoted:									
Any Relationships in client database:									
Tax - Occupation Code:									
** BAS/IAS Returns:			Practice to receive BAS/ IAS: Y / N						
			Practice to complete / lodge BAS/ IAS: Y / N						
Client Type:			Tax		Payro	II Tax			
			Audit		Spous	se Only			
client has a business or generates any business income			Commercial		Overs	eas			
client has/is a consulting business and would be targeted for PSI issues			Consultant						
** Business Turnover	•								
** No. of Employees:									
** Accounting Softwa	re used:								
** Financial Planning	Services:			Interested / Not Interested					
** Client Referred By:									
** Old Accountant:									
Date Client Interviewed:									
Date Form Completed	d:			By Accountant:					
Letters:	Required	Initials	Date	Admin:	R	equired	Initials	Date	
Ethical Letter				CU Form Required	d				
Welcome Letter				Make Up File					
Thank You Referral Letter				Client database updated					
Engagement Letter									
Other Comments:									

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