v. 2025-02-24

Requestor

Last name: First name:

with us?

tion changed?

Date of birth:

Phone (day):

Phone (night):

Email:

Address:

Postal code:

City:

etc.:



QUESTIONNAIRE: IDENTIFICATION

Date submitted : _____-(AAAA-MM-JJ) Mr. Mrs. Mr. Mrs. Partner Last name: First name[.] Tax Return of the Requestor and the Partner Tax reports to produce (years): eg: «2017» or «2015 to 2017» Province of residence on December 31: Do you require express service? *EB Conseil Fiscal* will treat my partner's return: Yes No Yes No Do you require an appointment If «No» : • Line 236 federal: Yes No with an accountant? Did you file your previous return • Line 275 provincial: Yes No • Providing us with your partner's full return is mandatory. If «Yes», has your personal informa-Yes No • Optimisation fees may apply. If «No», please leave the «Personal Information» sections blank. **Personal Information of the Requestor** Personal Information of the Partner Are you a Canadian citizen? Yes No Is your partner a Canadian citizen? Yes No - - (AAAA-MM-JJ) - - (AAAA-MM-JJ) Date of birth: Social insurance number: Social insurance number: Phone (day): Phone (night): Email: Residing at the same address Apt.: Address: Apt.: Province: Province: City: Code postal: If new address, specify date of move: If new address, specify date of move: - -- -**Drug Insurance of the Requestor Drug Insurance of the Partner** J F M A M J J A S O N D (Indicate months that apply) J F M A M J J A S O N D Governmental (RAMQ): Governmental (RAMQ): My own group insurance: My own group insurance: Group insurance (parent/partner): Group insurance (parent/partner): Other exceptions: Working Other exceptions: Working holiday program, immigrant, holiday program, immigrant, etc.:

Emergency Contact

Name of the contact:	Relationship:	Phone:	
			••••••

Civil Status

Single	Common law partner	Married	Separated	Divorced	Widowed	
lf your civil statu	is has changed this year:			Date of c	hange:	(AAAA-MM-JJ)

Dependents

(Childs, parents, grands-parents, etc. residing at same address. Please describe in the details any exceptional situation: e.g. dependent on even years.)

First name	Last name	Relationship	Date of birth (AAAA-MM-JJ)	Net income	Person with a disability	Post-seconday student	l pay child support
Details:							

Additional information

(Please answer yes if the following questions applies to you and/or your spource.)

Yes	No	l lived alone during the whole year (Excluding dependent persons)
Yes	No	l arrived in Canada or emigrated out of it this year
Yes	No	l own more than 100 000\$ of foreign assets (including investments holded here)
Yes	No	l wish to claim work expenses related to COVID using the method without calculation (maximum deduction of 500\$ for the federal level and of 400\$ for Quebec) [Only for 2020, 2021 & 2022]
		If so, the number of days I have worked at home because of COVID is:
		Me My spouse
Yes	No	I bought a first principal residence this year
		If so, my date of purchase is: (AAAA-MM-JJ)
Yes	No	I sold a principal residence during the year
Yes	No	I was born in the United States, am an American citizen or holder of a green card (refer to Effisca)
Yes	No	I would like to update my retirement planning (free service provided by an external partner)
Yes	No	I would like to receive promotional offers from partners regarding my mortgage
		If so, my mortgage renewal date is: (AAAA-MM-JJ)
Yes	No	Do you want credit splitting or income splitting, if necessary, to optimize the couple's tax liability? If you want a partial optimization, please specify the credits for which you want an optimization:
Yes	No	For double-checking purpose, we want to be able to download your current tax informations directly from CRA and Revenu Quebec Website. Do we have your approval?

LIST: DOCUMENTS TO BRING

Name of requestor

Name of partner

Instructions

Please sort your documents in the order of the documents in this list.

Please keep your originals and bring us only copies.

Documents to bring

Mandatory

- Last federal and provincial notice of assessment*
- Last federal **and** provincial income tax return (only for new clients)*
- Cheque specimen if never requested direct deposit Mandatory for Solidarity Tax Credit*
- LLB, HBP information if applicable (balance and amount to be repaid in the year, etc.)
- Solidarity tax credit: Slip 31 (if tenant) or City taxes ID number (if owner)*

Income

- Employment income: T4 (federal) / Relevé 1 (Quebec)*
- Investment income: T3, T5, T4A, T5008 or Summary of gains / losses, etc.*
- Scholarship: T4A*
- Public retirement: Old age security: T4A (OAS) + QPP: T4A (P) *
- Employment Insurance (unemployment): T4E slip*
- Parental insurance benefits (parental leave): T4E slip*
- COVID benefits: CERB or CESB or CRB or CRSB
 or CRCB T4A from CRA or T4E from Service Canada*
- CSST, SAAQ, Welfare: T5007/Slip 5*
- Self-employed (income & expenses) Fill the form
- Rental income (income & expenses) Fill the form
- Rental income (Building history) Fill the form
- T1135 if you own more than 100 000\$ of assets outside Canada
- Arrivals or departures from Canada Fill the form
- Principal residence disposition Fill the form
- Building Disposition (other than principal residence) Fill the form

Kids

- Childcare expenses
 - RL-24 Not Subsidized
 - RL-30 Subsidized (only before 2019) *
- Childcare tax credit advance payments: Slip 19*
- Children's Fitness Tax Credit, Children's art tax credit*

Deductions

- Work expenses (regular): TP-64.3+T2200 + Fill the form
- Work expenses (COVID-19 without calculation): Nothing to provide
- Work expenses (COVID-19 with calculation): T2200S + TP-64.3S + Fill the form
- RRSP: Official receipts (1st March to 31 December) *
- RRSP: Official receipts (60 first days of the year)*
- CELIAPP: Official receipts
- Tuition fees: Slip 8/T2202 or T2202A*
- Interest paid on student loans: Bank or Caisse account receipt*
- Medical expenses Fill the form
- Moving expenses Fill the form
- Charity donation / Political contributions*
- Union dues or professionals dues (if other than on T4)*
- Instalments / provisional payment: official government statement*
- Home support services for seniors (70 years old or more): If you are already receiving advance payments (RL-19), DO NOT COMPLETE the questionnaire Fill the form

Other

EB Conseil Fiscal info@ebconseilfisc.com

Provincial government 514 864-6299 Federal government 1 800 959-7383

* Item included in our base price. Extra fees applies if more than 15 documents. All other documents result in additional charges, including those not mentionned.



Fees estimation detail / Non-resident

Item	Estimated quantity	Non-taxable fee
NII request		100.00\$ + swearing-in fees
NRK request		70.00\$
NR4 request		115,00\$
NR5 request (minimum)		230,00\$
NR6 request		172.50\$
NR7-R request (minimum)		150.00\$
216 election (minimum)		312.50\$
216.1 election (minimum)		312.50\$
217 election (minimum)		287.50\$
218.3 election (minimum)		287.50\$
Business income (self-employed) (completed by us)		187.50\$
GST / QST return		230.00\$
Registered mail (by recipient / envelope)		93.50\$

Fees estimation detail / Estates & trusts

Item	Estimated quantity	Fee before taxes
Request for identification number (FED + QC) per level		70.00\$
Estate declaration - base rate		350.00\$ + additional fee annex
Clearance certificate		140.00\$
T3 slips - Relevés 16 (per beneficiary)		70.00\$

Fees estimation detail

Item	Estimated quantity	Fee before taxes
Tax returns - base rate		125.00\$
Rebate loyal client		-10.00\$
Additional slips (4 à 6)		60.00\$
Additional slips (7 à 9)		90.00\$
Student package		70.00\$
Arrival or departure in Canada		35.00\$
Work expenses schedule (regular)		80.00\$
Rental income schedule		80.00\$
Rental income schedule (completed by us)		80.00\$ + additional fees
Business income (self-employed)		105.00\$
Business income (self-employed) (completed by us)		105.00\$ + bookkeeping fee supplement
Moving fees		80.00\$
Capital gains schedule (minimum)		93.50\$
Deceased person (in addition to the base price)		187.50\$
Adjustment request (minimum + supplement on receipt of documents)		150.00\$
GST / QST return (minimum)		93.50\$
Supplement – complete file deposited from March 20th until June 15th		25.00\$
Registered mail (by recipient / envelope)		31.25\$
Additional documents (10 documents included in the base price)		3.89\$ / additional document
Express		50.00\$
Foreign tax credit / Foreign exchange calculation		Dilled new minorty
Optimization – spouse or child not processed by us		Billed per minute Technician: 2.00\$
Post-bankruptcy (mininum 268.75\$)		Senior techn.: 2.55\$
T1135 / T1161 (starting price 80.00\$)		Accountant: 3.13\$
Principal residence disposition (minimum 24.99\$)		Senior account.: 4.12\$
Assistance with an individual's tax audit (150.00\$)		Tax master: 8.33\$
		<u>.</u>

Conditions and pricing

Payment can be made by cash, debit/credit card or Interac transfer.

I have read and accept the above prices. A deposit corresponding to the estimated amount is required. If items not identified at the time of the **estimate** are discovered, the difference will be reflected on the final invoice.

I understand that all documents submitted to Eb Conseil Fiscal will be scanned and destroyed. At the time of collection, the staff member assigned to this task are not trained to answer tax questions.

Processing will begin as soon as all necessary documents (complete file) have been received, and the deposit has been paid.

Walk-in service: I understand that I will not meet with an accountant and that certain optimizations can only be performed during an appointment.

Expected delivery date

The tax returns will be available after this date.

Signature

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Subject: Mandate relating to the preparation of personal income tax returns

The purpose of this letter is to clearly outline the terms of the agreement under which we undertake to prepare your personal income tax return(s) for 20_____ and subsequent years.

It is agreed that you will provide us with the complete information necessary to produce this (these) income tax return(s).

We will prepare your tax return(s) based on the information you provide to us.

We will not review or verify this information or otherwise attempt to establish its completeness and truthfulness. This responsibility is yours alone.

If the tax authorities ask you for additional information or explanations relating to a tax return that we have prepared for you, we will provide you with all the assistance required. Note, however, that depending on each situation, this could be the subject of a separate mandate, billed according to our hourly rate.

We wish to emphasize the fact that this mandate cannot be used to prevent or detect any error or other irregularity whatsoever with respect to the information that you have provided to us.

A deposit is, however, required when submitting your documents. The final invoice will be issued at the end of the work. If the amount of the estimate is higher than the final invoice, we will refund you the difference.

Receive our best regards,

I hereby agree to the above exclusions and at the same time confirm the limits of the mandate that I entrust to the preparer of my personal income tax return(s).

Full name

Date

Signature