

PERSONAL IDENTIFICATION CARD



New Client YES NO

In wich language prefer comunicated with Gouvernement ENGLISH FRENCH

Name Last Name SIN

Email Date of Birth (YY/MM/DD)

Phone #

Select your Marital status on December 31, 2020 Married Common Law Spouse Divorced Widow Single Separated

IF your marital status change in 2020 please write the date (mm/dd)

Spouse's Name Last Name SIN

Email Date of Birth (YY/MM/DD)

Phone # Your spouse live outside of canada Write the amount that earned outside of Canada in 2019 (\$CA)

DEPENDENTS - WRITE THE INFO OF YOUR PARENTS, DAUGHTER AND SON OF IF THEY LIVE WITH YOU IN 2020

Name Last Name Relationship
Date of Birth (YY/MM/DD) NAS Certified Disability

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CURRENT ADDRESS - write the adress where you live today

Adress App City Province Code Postal

Change province these year If yes write the Date of change Change to these Province

IF YOU ARE MARRIED OR COMMON LAW SPOUSES- WRITE THE NAME OF WHO IS GOING TO RECEIVETHESE CREDITS

Solidarity Tax Credit

Day Care Refund

Work Premium

INTERNAL USE IMPOTS LORENTI

Dependientes TP1 480 TP1D TP1K (65 o +) Boucl. Fiscal (460)
Medical Anexo T T1/TP1 sumario Anexo J (70 o +) F9

COMMIS

VERIFICATEUR

You

Spouse

MIGRATORY STATUS

SELECT ONE OPTION

- A) Citizen B) Permanent Resident C) Accepted Refugee (date accepted)
- D) Reffugee in Progress E) International Student F) Temporary worker G) Sponsorship (Anexo P)

Is this your first income tax return in Canada

Enter the date of entry into Canada

You (yy/mm/dd)

Spouse (yy/mm/dd)

Total income outside Canada (If you arrived in 2020) CA\$

SELECT THE OPTIONS THAT CORRESPOND TO YOUR SITUATION IN 2020

Do you have assets and/or property abroad totaling \$100,000.00 CDN or more?

Did you declare bankrupt in 2020? If response yes write the date of:

Did you bring (send us) your pre-bankrup

Did you do TELETRAVAIL(home office) due to COVID-19

Are you renting a house or appartment in 2020 (Bail)

Do you have rental income

If you own your home write the municipal tax number --->

Did you sold your property in 2020?

Did you live alone all the year 2020, WITHOUT SHARE RENTAL

Did you buy your first house in 2020? ~~//////////~~

Have you withdrawn money from your REER to buy your home or postgraduate studies

Did you receive early reimbursement for childcare expenses

Did you study in college, university or a professional school in 2019

Do you have credits for education amount from 2019 or previous years

Did you have medical expenses such as: dentist, optician, pharmacy

You were in prison for more than 3 months during the year

Do you have a disability recognized by the government

Did you have fertility expenses in 2020?

Did you have a private medication insurance in 2020?

Did you recieve Social help or assurance of employment on 2019

T22005 / T7775	INTERNAL USE
Relevé 31	
T776	
Annexe D	
T1-31270	
Notice of Assesment	
RL-19	
T2202/RL-8	
Notice of Assesment	
NOT COVERED by private Insurance	
TPS / TP1D	
T2201	

SELECT WICH MONTHS

YOU	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC
SPOUSE	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC

FILL HERE IF YOU HAD ADDITIONAL INFO

I CERTIFIED THAT ALL THE INFORMATION PROVIDES IS REAL AND RELIABLE

SIGNATURE 1

SIGNATURE 2

Fecha de hoy

YOU WILL BE BILLED \$10 EXTRA FOR REPRINT IN CASE YOU FORGOT OR OMIT SOME INFORMATION.