



NEW CLIENT DETAILS FORM - NON INDIVIDUAL

Please complete and return to Accumulate Accountants + Business Advisors

**Accumulate
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Entity Name: _____

Trading Name: _____

Tax File Number: _____

Australian Business Number: _____

Australian Company Number: _____

Business Address: _____ Postcode: _____

Brief description of business: _____

GST Registered? _____

If yes, BAS frequency: _____

PAYG Registered? _____

Payroll Tax Registered? _____

Bookkeepers Name: _____

Bookkeepers Phone and Email: _____

Accounting Software and Version: _____

Username and Password: _____

Are you interested in receiving information regarding

our in-house small business accounting record keeping solution? _____

If you had \$20 to treat yourself, what would you buy? _____

(e.g. White Wine, Red Wine, Champagne, Beer, Whiskey, Movie Tickets, Chocolates etc)

How do prefer your coffee / tea? _____

Previous Accountants Firm Name: _____

Previous Accountant Contact Name: _____

Previous Accountants Address: _____

Previous Accountants Email Address: _____

Previous Accountants Phone Number: _____

Were you referred to Mawer Consulting. If yes, who by? _____

Client Signature: _____ Date: _____

By signing this New Client form I accept the terms of conditions of Accumulate Accountants + Business Advisors