

The Tax Shoppe

2014 BUSINESS CHECKLIST

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Questions? Call us at 201-327-4965

Business Information	Business Name		EIN
	Business Address		
	Business Phone	Cell Phone #	E-mail

Business Entity Type: (select one below)

Sole Proprietor

Date of Formation: _____

Partnership

State(s) of Formation: _____

Corporation

Name of person who formed this entity

S-Corporation

(provide copy of Election to be S-Corp Form 2553)

Who is your Registered Agent?

Estate / Trust

Non-Profit Organization

Do you have a copy of your formation documents? Yes No

State LLC Formation (You must check one of the Boxes above as well)

If yes, please provide us with all copies of formation documents. (Federal and State)

BUSINESS OWNERS (If additional owners, please list on separate page)

Name and Address	Home Phone	Social Security Number (required)		Percentage of Ownership
*Contact Member				

PERSONAL PROTECTION PLAN (PPP), It's insurance you don't want to be without. It covers the cost of services should you receive an IRS or State letter.

PPP Business Pricing according to Revenue:

Revenue under 500k..... \$39
 Revenue over 500k.....\$49
 Revenue over \$3 million..... \$75
 Sole proprietors include PPP on personal return..... \$39

YES! I accept the Personal Protection Plan. Please include the fee in with my preparation fee.

Initial - I accept coverage

No, I decline PPP. I understand that should I need add'l services, I will be billed at a rate of \$75/hour. (Average audit-3Hr)

Initial - I deny coverage

Payment Info Due Prior to filing of return (Required)	CREDIT CARD			
	MC / Visa / AMEX / Discover		Signature	
Name on Card & Billing Zip Code	CCID on back of card	Credit Card Number	Expiration Date	

