

Creative Tax Services
60 Milford Ave, Newark NJ 07108
Phone: 862 338-0102

Client Intake Information Form

- Primary First Name: _____ Last Name: _____
- Spouse First Name: _____ Last Name: _____
- Address _____ City _____ State _____ Zip Code _____
- Primary Phone Number: _____
- Spouse Phone Number: _____
- Primary Email Address _____
- Spouse Email Address _____
- Primary Birthdate MM _____ / DD _____ / year _____
- Spouse Birthdate MM _____ / DD _____ / Year _____
- Dependent Name As It Appeared on SS Card: _____
- Dependent Birthdate: MM _____ / DD _____ / Year _____

- Dependent Name As It Appeared on SS Card: _____
- Dependent Birthdate: MM _____ / DD _____ / Year _____
- Do You Owned Your Current Resident?
- Do You Owned a Business?
- Are any of your Dependent in College?
- Are You Self Employed?