## **NEW CLIENT DETAILS FORM**

Once filled out, please send through to: wardstax@wardstax.com.au

Title:					
*First Name:	Middle Name:			urname	
<b>NOTE:</b> If your name the Tax Office knows		nce you last lodg	ed a Ta	ax Return please w	vrite the name that
Do you have a Unive	rsity, TAFE or	Trade Loan?	YES	NO	
*Address:					
*Suburb		S	state	Postcode	
*Postal Address: (If different from abo					
*Suburb		S	state	Postcode	
*Date of Birth:					
How many years (tax	) are we doing f	or you today?			
*Tax File Number:					
Telephone Numbers of Work:	& Email address				
*Mobile:			Fax:		
*Email:					-
Bank account details (Tax Office requirem	ent for your refu	ınd.)			
*Name on Account:	(e.g. Fred E Ci	tizen)			-
*BSB:		(6 digits)			
*Account No:					-
*Name of person com	npleting form:_			Signature:	
New Tax Office requirement					
Photo ID to be sight		Drivers Licenc	e 🗆	Student ID □	18 Plus Card □

Agent