



RANGE
PARTNERS
Certified Practising Accountants

Ground Floor
45 Hamilton Street
PO Box 270
Gisborne VIC 3437

T: (03) 5428 1400
F: (03) 5428 1599
E: info@rangefg.com.au
W: www.rangefg.com.au

New Business Client Information Form

Business Name: _____

Trading Name: _____

Contact Person: _____

Contact Phone: _____

Address: _____

Shareholders/Beneficiaries: _____

Accounting Package: _____ Version: _____ Password: _____

File Copy Provided: Yes ☐ No ☐

ASIC Folder held by: Accountant ☐ Client ☐

GST Registered: Yes ☐ No ☐

Annual Turnover: _____ Number of Employees: _____

Work cover Policy: Yes ☐ No ☐

Need to apply for policy: Yes ☐ No ☐



RANGE
FINANCIAL GROUP
Accountants & Advisors

Partners
Tony Smith B Ec (Acc) CPA
Leon Maddern B Bus (Acc)

Limited Liability by a scheme approve
under Professional Standards Legislation





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Last tax year lodged and completed: _____

Work to be completed: _____

Queries: _____

DO YOU REQUIRE INFORMATION ON THE FOLLOWING SERVICES WE PROVIDE?

- FINANCIAL PLANNING SERVICE ☐
- ESTATE PLANNING ☐
- LENDING SERVICES ☐
- BUSINESS DEVELOPMENT SERVICES ☐

HOW DID YOU FIND US?

- REFERRAL ☐
- GOOGLE ☐
- WEBSITE ☐
- FACEBOOK ☐
- TWITTER ☐
- OTHER _____

I HEREBY AUTHORISE RANGE PARTNERS TO ACT AS MY OUR TAX AGENT FOR ANY MATTERS NECESSARY AND, GIVE ACCESS TO MY INFORMATION AVAILABLE ONLINE THROUGH THE ATO PORTAL

CLIENT SIGNATURE: _____

DATE: _____



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Q:\Administration Files\Policy & Procedures\Documents v6\New Business Client Initial Information Sheet V6.doc



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