Truck Owner-Operator ASS Tax Filing Checklist



Name (Mr./Ms.)				Cell		
Corporation Name				HST Nur	HST Number	
E-mail ID			Home A	Address		
SIN	Date of Birth(YY/MM/DD)					
Are you a Canadian Citizen O YES O NO						
Do you own/hold foreign property with value more than \$100,000 CAD O YES O NO			Have you setup Direct Deposit for Tax Refund? If no, attach a void cheque to setup one. YES NO			
Did you sell your home in this tax year O YES O NO						
Do you qualify for Disability Tax Credit O YES O NO						
RRSP Contribution			Medical & Dental Expenses			
Donation/Political Contribution			Student Loan Interest			
Property Tax/Rent Receipts			Rental Income			
Family Profile						
Marital Status Osingle OMarried OCommon-law Oseparated ODivorced OWidowed						
Any change in Marital Status YES N			O Child Care Expenses			
Spouse / Children Name	Date of Birth		SIN	Disability (Yes/No)	Relationship (Husband/Wife/Son/Daughter)	
Business Docun	nents				,	
 Bank Statements (Business Account) Credit Card Statements (Used for Business) Pay Statements from Carrier Fuel Receipts and Fuel Statements Truck / Trailer Repair Bills Toll Slips and Toll Card Statements 			 Truck Parking Bill Phone & Internet Bill WSIB Statements Truck or Trailer Bill of Sale (Purchase) Lease / Loan Documents Insurance Expenses 			
O Plate & Permit Fee Receipts			Other Expense Bills & Receipts			