



## New Company Checklist

### COMPANY INFORMATION

Company name:

DBA:

Address:

Telephone number:

Fax number:

Website:

Business entity type:

Sole Proprietor, partnership, LLC,  
Corporation (S or C)

IRS Employer Identification Number  
(EIN):

Secretary of State Number:

Fiscal year-end:

Accounting method  
(cash or accrual):

Date business started:

Date payroll started:

Name of owners/shareholders:

% of ownership for each:

Name of CPA/Tax Advisor:

CPA/Tax Advisor telephone number:

### CHECKLIST

ACCOUNTING SOFTWARE	
<input type="checkbox"/>	Name and version of software currently using:
<input type="checkbox"/>	Username, if applicable:
<input type="checkbox"/>	Password, if applicable:
SALES TAX	
<input type="checkbox"/>	Sales tax number:
<input type="checkbox"/>	Sales tax frequency (monthly or quarterly):

	<b>PAYROLL AND SUBCONTRACTORS</b>	
<input type="checkbox"/>	Payroll frequency (weekly, biweekly, semimonthly, monthly):	
<input type="checkbox"/>	Salary or per hour employees:	
<input type="checkbox"/>	Payroll company:	
<input type="checkbox"/>	Payroll subscription number, if applicable:	
<input type="checkbox"/>	Payroll expiration date, if applicable:	
<input type="checkbox"/>	Direct deposit (Yes or No):	
<input type="checkbox"/>	Direct deposit password:	
<input type="checkbox"/>	EFTPS PIN:	
<input type="checkbox"/>	EFTPS password:	
<input type="checkbox"/>	State withholding number:	
<input type="checkbox"/>	State withholding frequency (monthly or quarterly):	
<input type="checkbox"/>	NC Department of Revenue login:	
<input type="checkbox"/>	NC Department of Revenue password:	
<input type="checkbox"/>	State unemployment number:	
<input type="checkbox"/>	State unemployment PIN:	
<input type="checkbox"/>	Insurance company:	
<input type="checkbox"/>	Please provide a copy of the following for each current employee and subcontractor: W-4, NC-4, I-9, W-9, & COI'S	
<input type="checkbox"/>	Please provide a copy of all current year reports: 941, NCUI 101, & NC-5	
	<b>BANK ACCOUNTS – list each back separately</b>	
<input type="checkbox"/>	Total number of bank accounts:	
<input type="checkbox"/>	Name of bank:	
<input type="checkbox"/>	Bank account number(s):	
<input type="checkbox"/>	Bank user ID, if applicable:	
<input type="checkbox"/>	Bank password, if applicable:	
<input type="checkbox"/>	Secret questions, if applicable:	
<input type="checkbox"/>	Secret answers, if applicable:	

<input type="checkbox"/>	Name of bank:	
<input type="checkbox"/>	Bank account number(s):	
<input type="checkbox"/>	Bank user ID, if applicable:	
<input type="checkbox"/>	Bank password, if applicable:	
<input type="checkbox"/>	Secret questions, if applicable:	
<input type="checkbox"/>	Secret answers, if applicable:	
<input type="checkbox"/>	Please provide a copy of all bank statements not signed up for online banking, if applicable.	
<input type="checkbox"/>	Please provide check registers and/or check stubs & deposit slips for all bank accounts explaining each transaction.	
	<b>CREDIT CARDS – list each card separately</b>	
<input type="checkbox"/>	Total number of credit cards:	
<input type="checkbox"/>	Name of credit card:	
<input type="checkbox"/>	Credit card account number(s):	
<input type="checkbox"/>	Credit card user ID, if applicable:	
<input type="checkbox"/>	Credit card password, if applicable:	
<input type="checkbox"/>	Secret questions, if applicable:	
<input type="checkbox"/>	Secret answers, if applicable:	
<input type="checkbox"/>	Name of credit card:	
<input type="checkbox"/>	Credit card account number(s):	
<input type="checkbox"/>	Credit card user ID, if applicable:	
<input type="checkbox"/>	Credit card password, if applicable:	
<input type="checkbox"/>	Secret questions, if applicable:	
<input type="checkbox"/>	Secret answers, if applicable:	

<input type="checkbox"/>	Please provide a copy of all credit card statements not signed up for online banking, if applicable.	
	<b>LOANS &amp; LINES OF CREDIT – list each separately</b>	
<input type="checkbox"/>	Total number of loans & lines of credit:	
<input type="checkbox"/>	Name of loan/line of credit:	
<input type="checkbox"/>	Loan/line of credit account number(s):	
<input type="checkbox"/>	Outstanding balance:	
<input type="checkbox"/>	Monthly due date & payment amount :	
<input type="checkbox"/>	Loan/line of credit user ID, if applicable:	
<input type="checkbox"/>	Loan/line of credit password, if applicable:	
<input type="checkbox"/>	Secret questions, if applicable:	
<input type="checkbox"/>	Secret answers, if applicable:	
<input type="checkbox"/>	Name of loan/line of credit:	
<input type="checkbox"/>	Loan/line of credit account number(s):	
<input type="checkbox"/>	Outstanding balance:	
<input type="checkbox"/>	Monthly due date & payment amount :	
<input type="checkbox"/>	Loan/line of credit user ID, if applicable:	
<input type="checkbox"/>	Loan/line of credit password, if applicable:	
<input type="checkbox"/>	Secret questions, if applicable:	
<input type="checkbox"/>	Secret answers, if applicable:	
<input type="checkbox"/>	Name of loan/line of credit:	
<input type="checkbox"/>	Loan/line of credit account number(s):	
<input type="checkbox"/>	Outstanding balance:	
<input type="checkbox"/>	Monthly due date & payment amount :	

<input type="checkbox"/>	Loan/line of credit user ID, if applicable:	
<input type="checkbox"/>	Loan/line of credit password, if applicable:	
<input type="checkbox"/>	Secret questions, if applicable:	
<input type="checkbox"/>	Secret answers, if applicable:	
<input type="checkbox"/>	Please provide a copy of original signed loan paperwork for each loan/line of credit.	
<input type="checkbox"/>	Please provide copies of loan statements if not available to download online.	
<b>ADDITIONAL ACCOUNT INFORMATION</b>		
<input type="checkbox"/>	Please provide a copy of the chart of accounts	
<input type="checkbox"/>	Please provide a copy of open invoices owed to you.	
<input type="checkbox"/>	Please provide a copy of open invoices you owe.	
<input type="checkbox"/>	Please provide a copy of the depreciation schedule for all fixed assets.	
<input type="checkbox"/>	Please provide a copy of prior year financial statements from CPA/tax preparer, if applicable.	