

## NEW CLIENT WORKSHEET

Date: \_\_\_\_\_

Company: \_\_\_\_\_ DBA: \_\_\_\_\_  
(Legal Name)

Address: \_\_\_\_\_  
(Legal) STREET CITY STATE ZIP

Address: \_\_\_\_\_  
(Mailing) STREET CITY STATE ZIP

Payroll Contact: \_\_\_\_\_ Position: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

### PAYROLL TAX ID #'S, FREQ. AND SUI RATE:

### TAX RATE

### DEPOSIT FREQ.\*

Federal EIN \_\_\_\_\_

N/A

State Unemployment \_\_\_\_\_

Quarterly

State Withholding \_\_\_\_\_

N/A

\*W = Weekly S = Semi-weekly M = Monthly Q = Quarter

### BANK INFORMATION:

Name of Bank: \_\_\_\_\_ Branch/Location \_\_\_\_\_

ABA/Routing Number: \_\_\_\_\_ Account Number \_\_\_\_\_

Starting Check Number (for ASAP): \_\_\_\_\_  Please attach a voided check

### CALENDAR:

Estimated First Check Date: \_\_\_\_\_ Process Date: \_\_\_\_\_

Pay Schedule:  Weekly  Biweekly  Semi-Monthly  Monthly  Quarterly  Other \_\_\_\_\_

First period start and end date \_\_\_\_\_

If this date falls on a holiday or weekend, do you prefer your payroll to fall  *before* or  *after*?

Submission:  Email  Fax  Web Entry  E-Sheet  Auto-Pay  Other \_\_\_\_\_

Delivery:  Pick-up  Mail  Online Print  Self-Serve  FedEx  Other \_\_\_\_\_

Reports:  Gen Ledger  Labor/Dept  Time-Off  Job Costing  Other \_\_\_\_\_

Additional Services:  Time & Labor  Employee Self Serve  eHR  Other \_\_\_\_\_

*If in the middle of a calendar year, we will need itemized YTD and previous Quarter Totals for each employee paid; including gross earnings and all deductions. If possible, we would like copies of any 941s, UITRs, etc.*

### OTHER:

How did you hear about ASAP: \_\_\_\_\_

How did you process payroll prior: \_\_\_\_\_

Quote/Pricing: \_\_\_\_\_ ASAP Rep: \_\_\_\_\_

### ADDITIONAL INSTRUCTIONS/COMMENTS:

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Making Business **As Simple As Possible**

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