



## New Company Information

Business Name: \_\_\_\_\_

DBA: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Primary Contact: \_\_\_\_\_

Phone# :(     ) \_\_\_\_\_

Fax# :(     ) \_\_\_\_\_

Email: \_\_\_\_\_

Secondary Contact: \_\_\_\_\_

Phone# :(     ) \_\_\_\_\_

Fax# :(     ) \_\_\_\_\_

Email: \_\_\_\_\_

Referral Source: How did you hear about our services? \_\_\_\_\_

What payroll option would you like?

- Online Payroll
- Full Service Payroll
- After-the-Fact Payroll
- Timekeeping Services

Are there YTD Wages?  Yes  No

(If yes, we need reports by employee that show gross to net detail)

Would you like us to customize the chart of accounts for your general ledger?

Yes  No

(If yes, we need a chart of accounts from accounting software)

Would you like us to process Michigan New Hire Reporting?

Yes  No

Are there extra reports you would like?  Yes  No

Reports Requested: \_\_\_\_\_



## Client Bank Account Information

Please attach a voided check or copy of check from payroll account.

Financial Institution: \_\_\_\_\_

Bank Routing Number: \_\_\_\_\_ CK Acct Number: \_\_\_\_\_

What check number would you like us to begin with? \_\_\_\_\_

Would you like the payroll amount swept?  Yes  No

If so, please choose which amounts

All Amounts – all taxes, fees, and net checks are paid out of IPS account

Taxes and Fees – taxes and fees are paid out of IPS account

If not, all net checks, taxes, and fees will be paid out of your account.

Would you like your signature on the payroll checks?  Yes  No

(If yes, complete "Check Signing Authorization" form)

Would you like your company logo on the checks?  Yes  No

## Tax Information

Are you registered for payroll taxes?  Yes  No

If yes, please enter ID numbers below.

If not, do you want us to register for you?  Yes  No

Are you registered for other state taxes?

Sales Tax

Use Tax on Purchases

Use Tax on Rentals

If yes, would you like IPS to make these payments monthly by EFT?

Yes  No

Federal ID#: \_\_\_\_\_ - \_\_\_\_\_

State ID#: \_\_\_\_\_ - \_\_\_\_\_

State Unemployment #: \_\_\_\_\_

(Please provide copy of Current Year Rate Determination Letter)

Type of Business \_\_\_\_\_

(example; S-Corp, Corp, LLC, Sole Proprietor, non-profit, etc)



## Payroll Schedule

1<sup>st</sup> Check Date: \_\_\_\_/\_\_\_\_/\_\_\_\_  
Period Begin: \_\_\_\_/\_\_\_\_/\_\_\_\_ Period End: \_\_\_\_/\_\_\_\_/\_\_\_\_  
Day of the week begin: \_\_\_\_\_ Day of the week end: \_\_\_\_\_

### Payroll Frequency:

- Weekly
- Biweekly
- Semi-Monthly :  1<sup>st</sup> & 15<sup>th</sup>  15<sup>th</sup> & 31<sup>st</sup>  Other
- Monthly

When the pay date falls on a holiday, adjust check date to first available day:  Before Holiday  After Holiday

When a pay date falls on a weekend, adjust check date to first available day:  Before Weekend  After Weekend

### How would you like to report your employee hours to us?

- Drop Off  E-mail  Fax  Call In\*  Online  Swipeclock
- (\*Call in only if under 10 ee's)

What day of the week will you report your employee hours? \_\_\_\_\_  
(Please report by noon that day.)

### Would you like us to show employee pay rates on next payroll worksheet?

- Yes  No

(Some clients choose not to show pay rates for confidentiality purposes)

### How would you like to receive payroll checks?

- Mail directly to the employees home
- Include with reports via mail or pickup

### How would you like to receive your payroll reports?

- E-mail : \_\_\_\_\_
- Online
- Mail
  - Regular Mail
  - Priority Mail
  - UPS 2 Day Air
  - Overnight UPS
- Pickup at IPS office

Pick-up Day & Time: \_\_\_\_\_

(Our office hours are Mon-Thur 8-5pm, Fri 8-4pm)

