

# Initial Mandate Questionnaire

Master Data acquisition for new Clients – Persons

**Taxpayer**

**Spouse / Partner**

<b>Name</b>		
<b>First name</b>		
<b>Academic degree/ title</b>		
<b>Address</b>		
<b>Post Code/ Place</b>		
<b>Telephone</b>		
<b>Mobile phone</b>		
<b>Email</b>		
<b>Birth name</b>		
<b>Place of birth</b>		
<b>Date of birth</b>		
<b>Nationality</b>		
<b>Religion</b>		
<b>Marital status</b>		
<b>Marital status since</b>		
<b>Job</b>		
<b>Credit institution</b>		
<b>Iban</b>		
<b>Tax office</b>		
<b>Tax number</b>		
<b>Tax ID-No.</b>		
	<b>Child1</b>	<b>Child2</b>
<b>Different family name</b>		
<b>First name</b>		
<b>Street</b>		
<b>Area Code</b>		
<b>Place</b>		
<b>Child relationship (1)</b>		
<b>to taxpayer</b>		
<b>to spouse / Partner</b>		
<b>Date of birth</b>		
<b>Nationality</b>		
<b>Education level (2)</b>		

- (1) Biological child, foster child, adopted child, stepchild taken in the household, child taken in the household  
(2) Trainee, student, other education

Space for your comments: