

2024 MOVING EXPENSES CHECKLIST

We will require copies of all of the moving expense related receipts

| Client | | |
|---|----------------------------|-----|
| First name: | Last name: | |
| Previous Address Address: | | |
| City: | Postal Code: | |
| Current Address | | |
| Address: | | |
| | Postal Code: | |
| City: | Postal Code: | |
| Reason for moving (Select one option) | | |
| ☐ Work – Started new job or transferred locations | Employer Name: | |
| Business – Started a new business | Business Name: | |
| School – Started full-time school | Educational Institution Na | me: |
| Moving dates | | |
| Departed: | Arrived: | |
| Allowable Moving Expenses (Please provide original receipts Kilometres travelled | s and legal documents) | |
| Storage costs (if applicable) | | \$ |
| Movers (U-Haul, other) | | \$ |
| Temporary living costs (Hotel, B&B) | | \$ |
| Number of days spent in temporary living | | |
| Incidental costs (Changing address on legal doc's, driver | | \$ |
| Cost of selling old home (Advertising, notary, legal fees penalty) Provide Statement of Adjustments and Mortgage Docume | | \$ |
| Cost of buying new home (Legal fees Property Transfe | r Tax) | \$ |