

Year Request \*

## **T4 REQUEST FORM**

ATT: PLEASE FILL IN REQUIREMENTS IN RED & \*

## **AGENT INFORMATION**

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Payment Frequency	Monthly	Semi-Monthly	Bi-Weekly
How Many Hours A Week	Sy V - 5/	0.7	
Salary Amount \$	\$ /Year	\$ /Hour	
Salary Type	Annual	Hourly	W -
Employment Type	Full-Time	Part-Time	
Employee's Working Started Date			
Company Address	1		0
Client Company Name	And.	14	
Address		,	
Year Request			A
T4 #2 (If Request 2)			
Payment Frequency *	Monthly	Semi-Monthly	Bi-Weekly
How Many Hours A Week *			
Salary Amount \$ *	\$ /Year	\$ /Hour	
Salary Type *	Annual	Hourly	
Employment Type *	Full-Time	Part-Time	
Employee's Working Started Date *			
Company Address *			
Client Company Name *			
Address *			

## ADDITIONAL INFORMATION Additional Notes (Any Special Note or Instructions) PLEASE FILL & SIGN THE ABOVE FORM, SUBMIT ALONG WITH 2 IDS AT WWW.TURBOHUB123.COM