

Fact Find

Section 1: Client details

This document captures information about your personal details and financial situation. Please answer the questions as openly and honestly as you can. The information you provide us allows us to better understand you, and helps us to formulate a strategy that is tailored to your personal needs. Ensure to also provide us with financial statements for each of your products.

*denotes a mandatory field

Protecting your privacy

Information you provide us in this form will be handled in accordance with our privacy statement in the Client Acknowledgement Form, our Financial Services and Credit Guide (FSCG), and our Privacy Policy. Please contact us if you require a copy of these documents.

1.1 Why have you sought advice?*

Take some time to think about and note down what you want to achieve.

1.2 Personal details

Client 1

Title*	Given name*	
Middle name*	Surname*	
Preferred name*	Gender*	
Date of birth*	Marital status*	
Home address*		
Suburb*	State*	Postcode*
Postal address ☐ Same as above		
Suburb	State	Postcode
Contact phone number* ☐ Preferred		
Mobile number ☐ Preferred		
Email address*		
Tax residency* (please specify if not Australia)		
☐ Australia ☐ Other:		
Country of residence* (please specify if not Australia)		
☐ Australia ☐ Other:		

Client 2

Title*	Given name*	
Middle name*	Surname*	
Preferred name*	Gender*	
Date of birth*	Marital status*	
Home address* ☐ Same as client 1		
Suburb*	State*	Postcode*
Postal address ☐ Same as above		
Suburb	State	Postcode
Contact phone number* ☐ Preferred		
Mobile number ☐ Preferred		
Email address*		
Tax residency* (please specify if not Australia)		
☐ Australia ☐ Other:		
Country of residence* (please specify if not Australia)		
☐ Australia ☐ Other:		

Children or dependants

Full name*	Relationship	Gender	Date of birth*	Dependant until age*

1.2 Personal details (continued)

Health details

Client 1

How would you rate your current health? *

☐ Excellent ☐ Good ☐ Average ☐ Poor

Do you smoke?

☐ No

☐ Yes – Daily average:

Do you drink?

☐ No

☐ Yes – Daily average:

Do you have private health insurance?

☐ No

☐ Yes – Provider:

Type of cover:

☐ Comprehensive ☐ Basic

Client 2

How would you rate your current health? *

☐ Excellent ☐ Good ☐ Average ☐ Poor

Do you smoke?

☐ No

☐ Yes – Daily average:

Do you drink?

☐ No

☐ Yes – Daily average:

Do you have private health insurance?

☐ No

☐ Yes – Provider:

Type of cover:

☐ Comprehensive ☐ Basic

Estate planning

Do you have a Will?

☐ No

☐ Yes – Date of last review:

Do you have a Power of Attorney?

☐ No

☐ Yes – Type:

Date of last review:

Name of attorney:

Are there any limitations on the attorney?

☐ Yes ☐ No

Copy of Power of Attorney attached?

☐ Yes ☐ No

Do you have a funeral plan?

☐ No

☐ Yes – Value:

Purchase date:

Product provider:

Account number:

Do you have a Will?

☐ No

☐ Yes – Date of last review:

Do you have a Power of Attorney?

☐ No

☐ Yes – Type:

Date of last review:

Name of attorney:

Are there any limitations on the attorney?

☐ Yes ☐ No

Copy of Power of Attorney attached?

☐ Yes ☐ No

Do you have a funeral plan?

☐ No

☐ Yes – Value:

Purchase date:

Product provider:

Account number:

Notes

1.3 Employment, income and expenses

Employment

Client 1

Occupation type*

☐ Employee ☐ Self-employed ☐ Retired

☐ Home duties ☐ Unemployed

☐ Other

Employment type*

☐ Full-time ☐ Part-time ☐ Casual

☐ Fixed term ☐ Contractor

Contract end date:

Occupation / Position*

Employment hours (per week)

Employer*

Years with employer

Is salary sacrifice available? ☐ Yes ☐ No

Do you have a HECS/HELP debt? ☐ Yes ☐ No

Current leave balance (in days)

Annual leave

Sick leave

Other leave

Client 2

Occupation type*

☐ Employee ☐ Self-employed ☐ Retired

☐ Home duties ☐ Unemployed

☐ Other

Employment type*

☐ Full-time ☐ Part-time ☐ Casual

☐ Fixed term ☐ Contractor

Contract end date:

Occupation / Position*

Employment hours (per week)

Employer*

Years with employer

Is salary sacrifice available? ☐ Yes ☐ No

Do you have a HECS/HELP debt? ☐ Yes ☐ No

Current leave balance (in days)

Annual leave

Sick leave

Other leave

Retirement planning

Income required at retirement*

Income required at retirement*

Intended retirement age

Intended retirement age

Notes

1.3 Employment, income and expenses (continued)

Income and expenses

Client 1

Income (\$ per annum)

Gross income

Base salary or wage*	
Bonus/allowance	
Rental income	
Centrelink / DVA payments	
Retirement income stream	

Other income (please specify type & amount)

a.		
b.		
c.		
d.		

Non-taxable income

a.		
b.		

Total annual income*

Expenses (\$ per annum)

Essential expenses #	
Lifestyle expenses #	
Loan repayment(s)	
Total annual expenses*	

Superannuation (\$ per annum)

Salary sacrifice	
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Cashflow (\$ per annum)

Estimated surplus/deficit*	
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Client 2

Income (\$ per annum)

Gross income

Base salary or wage*	
Bonus/allowance	
Rental income	
Centrelink / DVA payments	
Retirement income stream	

Other income (please specify type & amount)

a.		
b.		
c.		
d.		

Non-taxable income

a.		
b.		

Total annual income*

Expenses (\$ per annum)

Essential expenses #	
Lifestyle expenses #	
Loan repayment(s)	
Total annual expenses*	

Superannuation (\$ per annum)

Salary sacrifice	
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Cashflow (\$ per annum)

Estimated surplus/deficit*	
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Notes

Detail the timeframe and amount of any substantial changes to your income or expenditure expected in the next 12 months, including employer termination payments.

Essential expenses include mortgage, rates, groceries. Lifestyle expenses include entertainment and memberships.

1.4 Insurances

Insurance type*	Policy details	
☐ Life ☐ TPD ☐ Trauma ☐ Income Protection	Policy name* 	Policy number*
	Sum insured* 	Policy owner*
☐ Life ☐ TPD ☐ Trauma ☐ Income Protection	Policy name* 	Policy number*
	Sum insured* 	Policy owner*
☐ Life ☐ TPD ☐ Trauma ☐ Income Protection	Policy name* 	Policy number*
	Sum insured* 	Policy owner*
☐ Life ☐ TPD ☐ Trauma ☐ Income Protection	Policy name* 	Policy number*
	Sum insured* 	Policy owner*
☐ Life ☐ TPD ☐ Trauma ☐ Income Protection	Policy name* 	Policy number*
	Sum insured* 	Policy owner*
☐ Life ☐ TPD ☐ Trauma ☐ Income Protection	Policy name* 	Policy number*
	Sum insured* 	Policy owner*
☐ Life ☐ TPD ☐ Trauma ☐ Income Protection	Policy name* 	Policy number*
	Sum insured* 	Policy owner*
☐ Life ☐ TPD ☐ Trauma ☐ Income Protection	Policy name* 	Policy number*
	Sum insured* 	Policy owner*
☐ Life ☐ TPD ☐ Trauma ☐ Income Protection	Policy name* 	Policy number*
	Sum insured* 	Policy owner*

1.5 Existing assets and liabilities

When completing your asset details, use the liabilities row to document any debt that may be linked to that particular asset. Where an asset does not have a debt attached, leave the liabilities row blank. Do the same for liabilities that have no asset attached.

Lifestyle assets

Please complete your details

Complete with your adviser

Description*

Current value*

Purchase amount*

Purchase date*

Asset tested*

☐ Yes ☐ No

Centrelink value*

Security for Loan*

☐ Yes ☐ No

Owner*

☐ Client 1 ☐ Client 2 ☐ Joint

Description*

Current value*

Purchase amount*

Purchase date*

Asset tested*

☐ Yes ☐ No

Centrelink value*

Security for Loan*

☐ Yes ☐ No

Owner*

☐ Client 1 ☐ Client 2 ☐ Joint

Description*

Current value*

Purchase amount*

Purchase date*

Asset tested*

☐ Yes ☐ No

Centrelink value*

Security for Loan*

☐ Yes ☐ No

Owner*

☐ Client 1 ☐ Client 2 ☐ Joint

Existing liabilities

Please complete your details

Complete with your adviser

Description*

Lender*

Current debt*

Interest rate*

Interest tax deductible*

☐ Yes ☐ No

Repayments and frequency*

Repayments*

☐ P&I ☐ I only

Owner*

☐ Client 1 ☐ Client 2 ☐ Joint

Description*

Lender*

Current debt*

Interest rate*

Interest tax deductible*

☐ Yes ☐ No

Repayments and frequency*

Repayments*

☐ P&I ☐ I only

Owner*

☐ Client 1 ☐ Client 2 ☐ Joint

Description*

Lender*

Current debt*

Interest rate*

Interest tax deductible*

☐ Yes ☐ No

Repayments and frequency*

Repayments*

☐ P&I ☐ I only

Owner*

☐ Client 1 ☐ Client 2 ☐ Joint

Notes

1.5 Existing assets and liabilities (continued)

Lifestyle assets (continued)

Please complete your details

Description*

Current value*

Complete with your adviser

Purchase amount*

Purchase date*

Asset tested*

☐ Yes ☐ No

Centrelink value*

Security for Loan*

☐ Yes ☐ No

Owner*

☐ Client 1 ☐ Client 2 ☐ Joint

Description*

Current value*

Purchase amount*

Purchase date*

Asset tested*

☐ Yes ☐ No

Centrelink value*

Security for Loan*

☐ Yes ☐ No

Owner*

☐ Client 1 ☐ Client 2 ☐ Joint

Description*

Current value*

Purchase amount*

Purchase date*

Asset tested*

☐ Yes ☐ No

Centrelink value*

Security for Loan*

☐ Yes ☐ No

Owner*

☐ Client 1 ☐ Client 2 ☐ Joint

Description*

Current value*

Purchase amount*

Purchase date*

Asset tested*

☐ Yes ☐ No

Centrelink value*

Security for Loan*

☐ Yes ☐ No

Owner*

☐ Client 1 ☐ Client 2 ☐ Joint

Existing liabilities (continued)

Please complete your details

Description*

Lender*

Current debt*

Description*

Lender*

Current debt*

Description*

Lender*

Current debt*

Description*

Lender*

Current debt*

Complete with your adviser

Interest rate*

Interest tax deductible*

☐ Yes ☐ No

Repayments and frequency*

Repayments*

☐ P&I ☐ I only

Owner*

☐ Client 1 ☐ Client 2 ☐ Joint

Interest rate*

Interest tax deductible*

☐ Yes ☐ No

Repayments and frequency*

Repayments*

☐ P&I ☐ I only

Owner*

☐ Client 1 ☐ Client 2 ☐ Joint

Interest rate*

Interest tax deductible*

☐ Yes ☐ No

Repayments and frequency*

Repayments*

☐ P&I ☐ I only

Owner*

☐ Client 1 ☐ Client 2 ☐ Joint

Interest rate*

Interest tax deductible*

☐ Yes ☐ No

Repayments and frequency*

Repayments*

☐ P&I ☐ I only

Owner*

☐ Client 1 ☐ Client 2 ☐ Joint

1.5 Existing assets and liabilities (continued)

Financial assets – Cash / Fixed interest / Managed funds / Shares / Property

Please complete your details

Complete with your adviser

Description*

Current value*

Purchase amount*

Purchase date*

Income pa (\$/%)*

Current units*

Used as loan security*

☐ Yes ☐ No

Reinvest income*

☐ Yes ☐ No

Owner*

☐ Client 1 ☐ Client 2 ☐ Joint

Description*

Current value*

Purchase amount*

Purchase date*

Income pa (\$/%)*

Current units*

Used as loan security*

☐ Yes ☐ No

Reinvest income*

☐ Yes ☐ No

Owner*

☐ Client 1 ☐ Client 2 ☐ Joint

Description*

Current value*

Purchase amount*

Purchase date*

Income pa (\$/%)*

Current units*

Used as loan security*

☐ Yes ☐ No

Reinvest income*

☐ Yes ☐ No

Owner*

☐ Client 1 ☐ Client 2 ☐ Joint

Description*

Current value*

Purchase amount*

Purchase date*

Income pa (\$/%)*

Current units*

Used as loan security*

☐ Yes ☐ No

Reinvest income*

☐ Yes ☐ No

Owner*

☐ Client 1 ☐ Client 2 ☐ Joint

Existing liabilities

Please complete your details

Complete with your adviser

Description*

Lender*

Current debt*

Interest rate*

Interest tax deductible*

☐ Yes ☐ No

Repayments and frequency*

Repayments*

☐ P&I ☐ I only

Owner*

☐ Client 1 ☐ Client 2 ☐ Joint

Description*

Lender*

Current debt*

Interest rate*

Interest tax deductible*

☐ Yes ☐ No

Repayments and frequency*

Repayments*

☐ P&I ☐ I only

Owner*

☐ Client 1 ☐ Client 2 ☐ Joint

Description*

Lender*

Current debt*

Interest rate*

Interest tax deductible*

☐ Yes ☐ No

Repayments and frequency*

Repayments*

☐ P&I ☐ I only

Owner*

☐ Client 1 ☐ Client 2 ☐ Joint

Description*

Lender*

Current debt*

Interest rate*

Interest tax deductible*

☐ Yes ☐ No

Repayments and frequency*

Repayments*

☐ P&I ☐ I only

Owner*

☐ Client 1 ☐ Client 2 ☐ Joint

1.5 Existing assets and liabilities (continued)

Financial assets – Cash / Fixed interest / Managed funds / Shares / Property (continued)

Please complete your details

Complete with your adviser

Description*

Current value*

Purchase amount*

Purchase date*

Income pa (\$/%)*

Current units*

Used as loan security*

☐ Yes ☐ No

Reinvest income*

☐ Yes ☐ No

Owner*

☐ Client 1 ☐ Client 2 ☐ Joint

Description*

Current value*

Purchase amount*

Purchase date*

Income pa (\$/%)*

Current units*

Used as loan security*

☐ Yes ☐ No

Reinvest income*

☐ Yes ☐ No

Owner*

☐ Client 1 ☐ Client 2 ☐ Joint

Description*

Current value*

Purchase amount*

Purchase date*

Income pa (\$/%)*

Current units*

Used as loan security*

☐ Yes ☐ No

Reinvest income*

☐ Yes ☐ No

Owner*

☐ Client 1 ☐ Client 2 ☐ Joint

Description*

Current value*

Purchase amount*

Purchase date*

Income pa (\$/%)*

Current units*

Used as loan security*

☐ Yes ☐ No

Reinvest income*

☐ Yes ☐ No

Owner*

☐ Client 1 ☐ Client 2 ☐ Joint

Existing liabilities (continued)

Please complete your details

Complete with your adviser

Description*

Lender*

Current debt*

Interest rate*

Interest tax deductible*

☐ Yes ☐ No

Repayments and frequency*

Repayments*

☐ P&I ☐ I only

Owner*

☐ Client 1 ☐ Client 2 ☐ Joint

Description*

Lender*

Current debt*

Interest rate*

Interest tax deductible*

☐ Yes ☐ No

Repayments and frequency*

Repayments*

☐ P&I ☐ I only

Owner*

☐ Client 1 ☐ Client 2 ☐ Joint

Description*

Lender*

Current debt*

Interest rate*

Interest tax deductible*

☐ Yes ☐ No

Repayments and frequency*

Repayments*

☐ P&I ☐ I only

Owner*

☐ Client 1 ☐ Client 2 ☐ Joint

Description*

Lender*

Current debt*

Interest rate*

Interest tax deductible*

☐ Yes ☐ No

Repayments and frequency*

Repayments*

☐ P&I ☐ I only

Owner*

☐ Client 1 ☐ Client 2 ☐ Joint

1.5 Existing assets and liabilities (continued)

Superannuation

Fund name	Member number	Current value	Owner
			☐ Client 1 ☐ Client 2
			☐ Client 1 ☐ Client 2
			☐ Client 1 ☐ Client 2
			☐ Client 1 ☐ Client 2
			☐ Client 1 ☐ Client 2
			☐ Client 1 ☐ Client 2
			☐ Client 1 ☐ Client 2
			☐ Client 1 ☐ Client 2

Retirement income stream

Fund name	Member number	Current value	Owner
			☐ Client 1 ☐ Client 2
			☐ Client 1 ☐ Client 2
			☐ Client 1 ☐ Client 2
			☐ Client 1 ☐ Client 2
			☐ Client 1 ☐ Client 2
			☐ Client 1 ☐ Client 2
			☐ Client 1 ☐ Client 2
			☐ Client 1 ☐ Client 2

Notes

1.6 Professional services details

Accountant details

Name:

Phone number:

Address:

Solicitor details

Name:

Phone number:

Address:

Notes