

At top of first page, insert BPW logo and contact details

Draft

Please follow the numbers for the order in which the form will flow

Background is to be pale blue

All fields to be fillable to the end of the segment

Consistent formatting please for headings eg with horizontal lines either side

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 South Perth WA 6151
 P: (08) 9423 0350 E mortgages@bpwealth.com.au
 W: www.bpwealth.com.au
 ABN: 78 097 264 554
 Australian Credit Representative 369994
 Australian Credit Licence Holder AMP Financial Planning Pty Ltd
 Australian Credit Licence Number 232706



Applicant Information and Needs Analysis

1. Personal Goals and Objectives – insert here

2. Personal Details

| | Client 1 | Client 2 |
|---|---|---|
| Title | Mr Mrs Ms Miss Other | Mr Mrs Ms Miss Other |
| First Name | | |
| Middle Names | | |
| Last Name | | |
| Previous Last Name | | |
| Date of Birth | / / | / / |
| Gender | Male Female | Male Female |
| Relationship Status | | |
| Citizenship if NOT Australian Resident | | |
| Driver's licence number | | |
| Expiry date | | |
| Residential Details | | |
| Current Street Address | | |
| Suburb State & Postcode | | |
| Date moved to this address | / / | / / |
| Residential Status | Owner Owner with Mortgage Renting Boarding with Parents Other | Owner Owner with Mortgage Renting Boarding With Parents Caravan Other |
| If renting or boarding, cost per week | \$ | \$ |

| | | |
|--|--------------------------------|--------------------------------|
| Postal address if different from Residential | | |
| Previous Address (If < 3yrs) | | |
| Suburb State & Postcode | | |
| Dates at this address | From To | From To |
| Second Previous Address (If < 3yrs) | | |
| Suburb State & Postcode | | |
| Dates at this address | From To | From To |
| Third Previous Address (If < 3yrs) | | |
| Suburb State & Postcode | | |
| Dates at this address | From To | From To |
| Home Phone | () | () |
| Mobile | | |
| Email | | |
| Preferred Method of Contact | Phone Mobile Email | Phone Mobile Email |

3. Dependants (Current and/or Expected)

| Name | Date of Birth | Gender | Relationship | Dependant of |
|------|---------------|-------------------|--------------|-------------------------------|
| | / / | Male Female | | Client 1 Client 2 Both |
| | / / | Male Female | | Client 1 Client 2 Both |
| | / / | Male Female | | Client 1 Client 2 Both |
| | / / | Male Female | | Client 1 Client 2 Both |

4. Employment

| Salaried Employment Details | Client 1 | Client 2 |
|-----------------------------|---|---|
| Occupation / Position | | |
| Employer | | |
| ABN | | |
| Employment Status | Full Time Part Time Self-Employed Casual Pension | Full Time Part Time Self-Employed Casual Pension |

| | | |
|---|--|--|
| Employment Start Date | / /20 | / /20 |
| Employer Phone Number | () | () |
| Contact Person | | |
| Employer Address | | |
| Self Employed details | Client 1 | Client 2 |
| Business Type | Company Trust Partnership Sole Trader | Company Trust Partnership Sole Trader |
| Business Name | | |
| ABN / ACN | | |
| Start date | | |
| If you have been at your current workplace for less than three years, please provide details of your previous employment | | |
| Previous Occupation / Position | | |
| Previous Employer | | |
| ABN | | |
| Previous Employment Status | Full Time Part Time Self-Employed Casual | Full Time Part Time Self-Employed Casual |
| Previous Employment Period | Start: / / End: / / | Start: / / End: / / |
| Previous Employer Phone Number | () | () |
| Second Previous Occupation / Position | | |
| Previous Employer | | |
| ABN | | |
| Previous Employment Status | Full Time Part Time Self-Employed Casual | Full Time Part Time Self-Employed Casual |
| Previous Employment Period | Start: / / End: / / | Start: / / End: / / |
| Previous Employer Phone Number | () | () |
| Third Previous Occupation / Position | | |
| Previous Employer | | |
| ABN | | |
| Previous Employment Status | Full Time Part Time Self-Employed Casual | Full Time Part Time Self-Employed Casual |
| Previous Employment Period | Start: / / End: / / | Start: / / End: / / |
| Previous Employer Phone Number | () | () |
| 5. Income | Client 1 | Client 2 |
| Income Type | Amount | Amount |

| | | | | |
|------------------------------|----|-----------|----|-----------|
| Salary Gross | \$ | per annum | \$ | per annum |
| Allowances | \$ | per annum | \$ | |
| Bonus | \$ | | \$ | |
| Overtime | \$ | | \$ | |
| Govt benefits | \$ | | \$ | |
| Self employed income this FY | \$ | | \$ | |
| Self employed income last FY | \$ | | \$ | |
| | | | | |

| 11. Closest Relative Not Living With You | | | Client 1 | Client 2 |
|--|-----|--|----------|----------|
| Name | | | | |
| Phone | () | | () | |
| Address | | | | |
| Relationship to You | | | | |
| | | | | |

| 10. General Considerations – credit history | | |
|---|----------|----------|
| | Client 1 | Client 2 |
| Has there been any financial stresses or applications for hardship for any existing loans? | Yes No | Yes No |
| Have there been any defaults on any loans or debts in the last two years? | Yes No | Yes No |
| Do you expect any significant changes to your financial situation over the foreseeable future that could adversely affect your ability to meet your loan repayments or reduce your income as stated in this document? | Yes No | Yes No |
| Are you a director of any companies? | Yes No | Yes No |

If 'Yes' to any of the above, please provide details

| 9. Purpose of Loan | | |
|---|--|---|
| <input type="checkbox"/> Owner occupied | <input type="checkbox"/> Purchase house | <input type="checkbox"/> Refinance: Why? |
| <input type="checkbox"/> Investment | <input type="checkbox"/> Purchase land <input type="checkbox"/> Purchase land and build <input type="checkbox"/> Build only <input type="checkbox"/> First Home Buyer | <input type="checkbox"/> Better interest rate <input type="checkbox"/> Consolidate debt <input type="checkbox"/> Specific product features <input type="checkbox"/> Reduce overall commitments <input type="checkbox"/> Reduce payments <input type="checkbox"/> Unhappy with current lender |

| | | | |
|----------------|----|---------------------|-------|
| Purchase Price | \$ | Loan Term Required: | years |
| | | | |

| Product Information | Type of repayments | Frequency of repayments |
|---|--|--------------------------------------|
| <input type="checkbox"/> Variable rate loan | <input type="checkbox"/> Principle & Interest | <input type="checkbox"/> Weekly |
| <input type="checkbox"/> Fixed rate loan years <input type="checkbox"/> Rate lock | <input type="checkbox"/> Interest only years | <input type="checkbox"/> Fortnightly |
| <input type="checkbox"/> Internet banking | If interest only, please state why | <input type="checkbox"/> Monthly |
| <input type="checkbox"/> Phone banking | Merge these 4 cells (below) so | |
| <input type="checkbox"/> Offset account – how many? | this is one empty space to allow for clients to complete reasons for interest only | |
| <input type="checkbox"/> Credit card | | |
| <input type="checkbox"/> Redraw facility | | |
| <input type="checkbox"/> Branch access | | |

Additional Comments:

1. Personal Goals and Objectives

| | Client 1 | Client 2 |
|--|----------|----------|
| Short Term (1-2 years) | | |
| Medium Term (3-5 years) | | |
| Long Term (5+ years) | | |
| If over 45, outline the plan to have all debt cleared prior to retirement. | | |

Additional comments:

6. Assets

| Real Estate Assets | Address | Owner/s | Value |
|--------------------|---------|---------|-------|
|--------------------|---------|---------|-------|

| | | | |
|---------------------|--|-----------------------------|----|
| Home | | Client 1 Client 2 Joint | \$ |
| Investment Property | | Client 1 Client 2 Joint | \$ |
| Investment Property | | Client 1 Client 2 Joint | \$ |
| Investment Property | | Client 1 Client 2 Joint | \$ |
| | | | |

Total Value \$

| Lifestyle Assets | Make, Model, Year | Owner/s | Value |
|------------------|-------------------|-----------------------------|-----------|
| Motor Vehicle 1 | | Client 1 Client 2 Joint | \$ |
| Motor Vehicle 2 | | Client 1 Client 2 Joint | \$ |
| Boat | | Client 1 Client 2 Joint | \$ |
| Caravan | | Client 1 Client 2 Joint | \$ |
| Other: | | Client 1 Client 2 Joint | \$ |
| | | Total Value | \$ |

Savings and deposit/offset accounts:

| Institution & type of account | Account details | Owner/s | Balance |
|-------------------------------|-----------------|-----------------------------|-----------|
| | | Client 1 Client 2 Joint | \$ |
| | | Client 1 Client 2 Joint | \$ |
| | | Client 1 Client 2 Joint | \$ |
| | | Client 1 Client 2 Joint | \$ |
| | | Client 1 Client 2 Joint | \$ |
| | | Client 1 Client 2 Joint | \$ |
| | | Total Value | \$ |

| Superannuation & Shares | Owner/s | Value |
|-------------------------|-----------------------------|-------|
| Fund: | Client 1 Client 2 Joint | \$ |
| Fund: | Client 1 Client 2 Joint | \$ |

| | | |
|----------------------------------|-----------------------------|--------------|
| Fund: | Client 1 Client 2 Joint | \$ |
| Shares: | Client 1 Client 2 Joint | \$ |
| Other: | Client 1 Client 2 Joint | \$ |
| Total Value | | |
| Total Value | | \$ |
| Other Assets | Owner/s | Value |
| Home Contents | Client 1 Client 2 Joint | \$ |
| Personal Effects / Jewellery | Client 1 Client 2 Joint | \$ |
| Tools of Trade | Client 1 Client 2 Joint | \$ |
| Other: | Client 1 Client 2 Joint | \$ |
| Other: | Client 1 Client 2 Joint | \$ |
| Total Value | | \$ |
| Total Value of all Assets | | \$ |

7. Liabilities

| Liabilities | Lender/s | Total Limits | Total Amount Owning |
|------------------------------------|----------|--------------|---------------------|
| Home Loan | | | |
| BSB Account # Remaining term | | \$ | \$ |
| Home Loan | | | |
| BSB Account # Remaining term | | | |
| Investment Loan – secured by | | | |
| BSB Account # Remaining term | | \$ | \$ |
| Investment Loan - secured by | | | |
| BSB Account # Remaining term | | \$ | \$ |
| Investment Loan - secured by | | | |
| BSB | | \$ | \$ |

| | | | |
|------------------------------------|--|----|-----------|
| Account # Remaining term | | | |
| Investment Loan - secured by | | | |
| BSB Account # Remaining term | | \$ | \$ |
| | | \$ | \$ |
| Total | | | \$ |

| Liabilities | Lender | Limit | Visa/MC | Owner/s | Balance |
|--------------|--------|-------|---------|---------------------|-----------|
| Credit card | | \$ | | Client 1 Client 2 | \$ |
| Credit card | | \$ | | Client 1 Client 2 | \$ |
| Credit card | | \$ | | Client 1 Client 2 | \$ |
| Credit card | | \$ | | Client 1 Client 2 | \$ |
| Store card | | \$ | | Client 1 Client 2 | \$ |
| Store card | | \$ | | Client 1 Client 2 | \$ |
| Total | | | | | \$ |

| Other loans | Lender | Limit | Residual | Expiry | Total Owning |
|--------------------------|--------|-------|----------|--------|--------------|
| Personal Loan 1 | | \$ | \$ | / /20 | \$ |
| Personal Loan 2 | | \$ | \$ | / /20 | \$ |
| Car Loan 1 | | \$ | \$ | / /20 | \$ |
| Car Loan 2 | | \$ | \$ | / /20 | \$ |
| HELP Debt | | \$ | \$ | / /20 | \$ |
| HELP Debt | | \$ | \$ | / /20 | \$ |
| Other: | | \$ | \$ | / /20 | \$ |
| Total Liabilities | | | | | \$ |

Additional details:

| 8. Living Expenses per month | |
|--|----|
| Owner Occupied property – Council & Water rates, electricity, gas, strata fees | \$ |
| Investment property – Council & Water rates, electricity, gas, strata fees | \$ |

| | |
|---|----|
| Telephone, internet, pay TV | \$ |
| Groceries | \$ |
| Recreation & Entertainment | \$ |
| Clothes, shoes, personal care | \$ |
| Medical & health – doctor, dentist, pharmacy | \$ |
| Transport – petrol, car registration, maintenance, public transport | \$ |
| Education – school fees, books, uniform | \$ |
| Childcare | \$ |
| Insurance – home & contents | \$ |
| Insurance – private health, car | \$ |
| Insurance – life or income protection that is not within superannuation | \$ |
| Other eg gym membership, hobbies, gifts | \$ |
| Other eg child maintenance payments | \$ |
| Total | \$ |

12. Date completed and notes

