|  |
| --- |
| **Client Information Sheet** |
| **Thank you for giving me the opportunity to assist you with your future financial needs.****At Navigate Finance and Wealth Pty Ltd we like to ensure your well-being as much as possible. We will ask you some questions relating to your current and future finance and insurance needs to ensure your new mortgage will not adversely affect your financial position and that the products suggested will meet your requirements.****Please fill in this fact find document and return to me before our appointment.** **Return to Jason Smith at jason@navfw.com.au (email)****If you have any questions please do not hesitate to contact me on 0439 524419** ***Please Do Not Use Staples*** |
|  |
|

|  |  |
| --- | --- |
| Client Name |  |
| Date |  |
| Referred by: |  |

Preferred Contact:

|  |
| --- |
| Email:  |
| Home Phone: |
| Work Phone:  |
| Mobile:  |

|  |
| --- |
| **Property Finance Consultant** |
| Name: | Jason Smith |
| Jason Smith is a credit representative (No 508187) of BLSSA Pty Ltd ACN 117651760 (Australian Credit Licence 391237) |
| Mobile Number: | 0439 524419 |
| Email Address: | jason@navfw.com.au |

**Client Information Sheet**

|  |  |  |  |
| --- | --- | --- | --- |
| Loan Amount Sought: |  | Purchase Price or Property Value |  |
| REASON FOR FINANCE | * Purchase First Home
* Purchase New Home
* Purchase new home and sell existing property
* Purchase new Investment Property
* Refinance existing mortgage
* Consolidate debts into your mortgage
* Other
 |
| Are you a first home buyer? | * Yes
* No
 |
| If purchasing, Amount of deposit available  | $ |
| Source of Deposit: | * Personal Savings (over 3 months or more)
* Gifted
* Equity in existing property
* Other
 |
| If purchasing, have you signed a contract of sale subject to financing? | * No
* Yes
 |
| If Yes, when is the expected settlement date? |  |
| If purchasing property, how long will the property be retained? | * Short term, Less than 5 years?
 | * Medium Term 5 – 10 years
 | * Long Term – 10 years PLUS
 |
| If Refinancing/Debt Management, please provide the important factor | * Minimize monthly repayments?
 | * Minimize exposure to interest rates on current debts
 | * Other Comments
 |
| Is there a particular credit product or lender that you prefer:  |  |

 |
| **APPLICANT DETAILS**  |  |  |
|  | **Applicant 1:** | **Applicant 2:** |
| Title: Please circle: | Mr.MrsMiss | MsDr.  | MrMrsMiss | MsDr. |
| First and Middle names: |   |  |
| Surname: |  |  |
| Date of birth |  |  |
| Marital status | * Married
* Single
* De-Facto
* Separated/Divorced
 | * Married
* Single
* De-Facto
* Separated/Divorced
 |
| Relationship to Applicant 1 |  |  |
| Ages of dependent children: |  |  |  |  |  |  |
| Contact phone numbers:  | Home:Work:Mobile:  | Home:Work:Mobile:  |
| E-mail address: |  |  |
| **RESIDENTIAL ADDRESS** |
| Address: |  |  |
| Mailing Address if different: |  |  |
| Status: Please Circle | Renting Living with parentsBoardingOwner with Mortgage | Renting Living with parentsBoardingOwner with Mortgage |
| If renting, landlord’s details and phone number: |   |   |
|  Date you moved to this address? |   |  |
| If less than three years, Please provide previous addresses:  |  |  |
| How long were you at this address for? |  |  |
| **Drivers License:** | No: State: Date Issued: Expiry Date:  | No: State: Date Issued: Expiry Date: 0 |
| **REFERENCE – Details of nearest relative not living with you – (Name, Address, Contact ph. no. and Relationship to you)** | Name: Contact #: Address: Relationship to you:  | Name: Contact #: Address:Relationship to you:  |
| **AUSTRALIAN CITIZEN? (please circle)** | * Australian Citizen
* Australian Permanent Resident
 |
| **EMPLOYMENT** |
| Employer’s name in full:Address & Phone # (very important) | Name:Address:Phone #: | Name:Address:Phone #:  |
| Start Date with current employer : | Start Date:  |  Start Date:  |
| Occupation/Job Title: |  |  |
| Employment Status: Please circle | Full Time Self employedCasual ContractorPermanent Part Time | Full Time Self employedCasual ContractorPermanent Part Time |
| Contact details for verifying employment) e.g.: Paymaster.no 1800 or mobile numbers | Name: Phone number:  | Name:Phone number: |
|  **If less than three years, Previous provide employer details: very important!!!!** | Name:Address: | Name:Address: |
| Time with previous employer | From: To: | From: To: |
| Previous occupation/job title: |  |  |

|  |
| --- |
| **INCOME** |
|  | **GROSS** | **NET** | **GROSS** | **NET** |
| Base Annual Income/Salary : | $  | $ | $  | $ |
|  Regular Overtime/Penalties: |  $ | $ |  $ | $ |
| Rental Income: |  |  |
| Investment Income: | $ | $ |
| Government allowances: | $ | $ |
| Other income, provide detail… |  |  |
| SUBTOTAL net | $ | $ |
| **TOTAL NET ANNUAL INCOME** |  |
| **Total net annual income divided by 12, TOTAL NET MONTHLY INCOME** | **$** |
| **ASSETS** |
| **Properties Owned:** | **Asset 1** | **Asset 2** | **Asset 3** |
| Address: |  |  |  |
| Value: |  |  |  |
| In the name of: | \*Applicant 1 \*Applicant 2 | \*Applicant 1 \*Applicant 2 | \*Applicant 1 \*Applicant 2 |
| **Savings Account & Term Deposit** |  |  |  |
| Financial Institution: |  |  |  |
| BSB & Account Number:  |  |  |  |
| Balance: |  |  |  |
| In the name of: | Applicant 1 Applicant 2 | Applicant 1 Applicant 2 | \*Applicant 1 \*Applicant 2 |
| **Motor Vehicles** |  |  |  |
| Make and Model: |  |  |  |
| Year Built: |  |  |  |
| Value: |  |  |  |
| In the name of: | Applicant 1 Applicant 2 | Applicant 1 Applicant 2 | Applicant 1 Applicant 2 |
|  |  |  |  |
| **Other Assets** | Amount | Amount | Amount |
| Household items (e.g. Home contents) |  |  |  |
| Investments: (Shares, managed funds etc..) |  |  |  |
| Boat, Caravan:(please circle) |  |  |  |
| Other, provide details: |  |  |  |
| SUPERANNUATION:  | **Applicant 1** **$** | **Applicant 2** **$** |
| LIFE INSURANCE amount insured for: | **Applicant 1** **$** | **Applicant 2****$** |
| **LIABILITIES** |
| **LIABILITIES:**  | Loan 1: | Loan 2: | Loan 3: |
| **Mortgage / Personal Liabilities/car lease-loans** |  |  |  |
| Type of finance, (mortgage/personal loan): |  |  |  |
| Name of financial institution: |  |  |  |
| In the name of: | \*Applicant 1 \*Applicant 2 | \*Applicant 1 \*Applicant 2 | \*Applicant 1 \*Applicant 2 |
| Original loan amount: |  |  |  |
| Amount currently owing: |  |  |  |
| Please state minimum monthly repayment: |  |  |  |
|  **Credit Cards/ Store Cards:** | Card 1: | Card 2: | Card 3: | Card 4: | Card 5: |
| Name of financial institution: |  |  |  |  |  |
| Credit Limit: |  |  |  |  |  |
| Amount currently owing: |  |  |  |  |  |
| Type of card – Visa, MasterCard, Amex: |  |  |  |  |  |

|  |
| --- |
| **EXPENSES**  |
| **Monthly Loan Repayments/Rent** | **Existing Please circle monthly ; fortnightly; weekly** | **FUTURE Please circle monthly fortnightly or weekly** |
| Rent : | **M F W** |  | **M F W** |  |
| Existing Home Loan: | **M F W** |  | **M F W** |  |
| Credit Cards/Store Cards (combined monthly payment) | **M F W** |  | **M F W** |  |
| Personal Loan/Car Loan/ car lease | **M F W** |  | **M F W** |  |
| Other Loans: | **M F W** |  | **M F W** |  |
| **TOTAL LOAN REPAYMENTS** |  |  |  |  |
| **Monthly Living Expenses** |  |
| Food | **M F W** |  | **M F W** |  |
| House expenses- electricity, gas, water rates, council rates; property maintenance | **M F W** |  | **M F W** |  |
| Insurance & Health costs- home contents; car insurance; private health fund; personal insurance  | **M F W** |  | **M F W** |  |
| Transport (e.g. public transport, petrol, registration, repairs) | **M F W** |  | **M F W** |  |
| Education & Childcare – school fees, uniforms  | **M F W** |  |  **M F W** |  |
| Child Maintenance  | **M F W** |  | **M F W** |  |
| Communication- mobile phone, home phone, internet, Foxtel.  | **M F W** |  | **M F W** |  |
| Holidays & Gifts  | **M F W** |  | **M F W** |  |
| Entertainment: takeaway; alcohol; tobacco; gambling; children’s activities | **M F W** |  | **M F W** |  |
| Clothing & Personal – clothing, haircuts, sports; memberships | **M F W** |  | **M F W** |  |
| **TOTAL LIVING EXPENSES** |  |  |

|  |
| --- |
| **PREFERRED FEATURES:** |
| Feature/s | Yes  | No  | Optional | Comment |
| Fixed rate/repayments; It is important to have certainty about the interest rate and/or repayments for a fixed time. |  |  |  |  |
| Interest Only; Minimize repayments by paying interest only. |  |  |  |  |
| Fixed and Variable; Combination of fixed and variable interest rates.  |  |  |  |  |
| Pay off quickly/Additional repayments; Additional payments allowed without penalty |  |  |  |  |
| Offset / Split Account; Separate sub account to help reduce interest charges daily |  |  |  |  |
| Redraw; Access to additional repayment funds should they be required. |  |  |  |  |
| Product Flexibility; Ability to switch between lender products |  |  |  |  |
| Lender Package; Savings accounts and credit card facility as part of the loan package |  |  |  |  |
| Are there any additional product features that you require? |  |
| **YOUR FINANCIAL SECURITY** | **Applicant 1** | **Applicant 2** |
| Have you received professional advice from an accountant, solicitor or financial planner regarding your financial objectives? | * Yes
* No
 | * Yes
* NO
 |
| If yes, please provide details: |  |  |
| Are there any defaults, finance judgments or legal proceeding against any of the applicants? (e.g. defaults, letter of demand) Have any of the applicants ever been declared bankrupt? | * Yes
* No
 | * Yes
* No
 |
| Are any of the applicants under financial stress from existing commitments? | * Yes
* No
 | * Yes
* No
 |
| If YES to financial stress, are any of the current debts in arrears? please provide details: |  |  |

|  |  |  |
| --- | --- | --- |
| **PROTECTING YOUR LIFFESTYLE/ASSETS** | **Applicant 1** | **Applicant 2** |
| Do you have any insurance to protect your lifestyle:  | * Life Insurance
* Total Permanent Disablement
* Income Protection
* Other
 | * Life Insurance
* Total Permanent Disablement
* Income Protection
* Other
 |
| How would you maintain your current lifestyle with a temporary or permanent loss of income? Please provide details/…. |  |  |
| Do you have Home and Contents Insurance | * Yes
* No
 | * Yes
* No
 |
| **Significant Changes in the Future:**Do you anticipate significant changes to your circumstances that will lead to changes in your ability to make contracted Repayments? Provide details below….. |
| Temporary change in income | * Yes
* No

If Yes, provide details…. | * Yes
* No

If Yes, provide details…. |
| Permanent change in income | * Yes
* No

If Yes, provide details…. | * Yes
* No

If Yes, provide details…. |
| Anticipated large expenditure | * Yes
* No

If Yes, provide details…. | * Yes
* No

If Yes, provide details…. |
|  | If Yes, provide details…. | If Yes, provide details…. |
|  If yes to any of the above, How will this change be overcome? | * Additional Income
* Savings
* Reducing expenditure
* Financial Support from family
* Sale of Assets
* Other, provide details….
* I cannot overcome this change
 |  |

|  |  |
| --- | --- |
| Is there anything else that may reasonably be expected to have a bearing on your application for credit, knowing thatif you leave such information out it may create problems n the future? |  Provide details…. |
| Are you comfortable with your ability to make repayments under the proposed loan without difficulty? | * Yes
* No
 |
| Please provide any additional information you believe will assist in the assessment of your application |   |

**The details you have completed will allow me to review your current circumstances and assist you with a finance option to suit your needs.**

**Thank you.**