

**Applicant/s**

Name: \_\_\_\_\_

Name: \_\_\_\_\_

**Guarantor/s**

Name: \_\_\_\_\_

Name: \_\_\_\_\_

**Agenda**

- Getting to know you, your goals and objectives
- Collecting information about you
- Analyzing your borrowing capacity & lender options
- How to protect new / existing assets, you & your family
- Next steps to get this all in place

**Objectives and Goals**

**Reasons for seeking finance advice:**

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**Short Term (1-5 yrs):**

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**Medium Term (6-15 yrs):**

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**Long Term (15-30 yrs):**

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**Priority of Goals 'What's your greatest challenge in achieving these Goals'**

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**Interview Notes:** *(i.e. previous borrowing history, any lending/product preferences, structure of loan, fixed v's variable, preferences for asset type, income & family protection & or refinance details)*

**Key Outcome Notes:**

PERSONAL DETAILS	Applicant 1	Applicant 2
Full Name		
Preferred Name		
Current Address		
Time at Address		
Previous Address (if within last three years)		
Address Status	Mortgage <input type="checkbox"/> Own <input type="checkbox"/> Rent <input type="checkbox"/> Other <input type="checkbox"/>	Mortgage <input type="checkbox"/> Own <input type="checkbox"/> Rent <input type="checkbox"/> Other <input type="checkbox"/>
First Home	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Driver Licence Number	State Exp.	State Exp.
Date of Birth		
Phone Number/s	H: W:	H: W:
Mobile Number		
Email Address		
Nationality/Residency		
Marital Status	Single <input type="checkbox"/> Married <input type="checkbox"/> De Facto <input type="checkbox"/> Other <input type="checkbox"/>	Single <input type="checkbox"/> Married <input type="checkbox"/> De Facto <input type="checkbox"/> Other <input type="checkbox"/>
Number & Ages of Dependents		
Mother's Maiden Name		
Relative or Close Friend Details		
CURRENT EMPLOYMENT	Applicant 1	Applicant 2
Type of Employment	<input type="checkbox"/> PAYG <input type="checkbox"/> Self-employed <input type="checkbox"/> Not employed	<input type="checkbox"/> PAYG <input type="checkbox"/> Self-employed <input type="checkbox"/> Not employed
Status	<input type="checkbox"/> Full time <input type="checkbox"/> Part time <input type="checkbox"/> Casual <input type="checkbox"/> Contract	<input type="checkbox"/> Full time <input type="checkbox"/> Part time <input type="checkbox"/> Casual <input type="checkbox"/> Contract
Employer Name		
Employer Address		
Employer Contact Name		
Employer Contact Number		
Position		
Time in Position		
Gross Annual Income		
Net Monthly Income		
PREVIOUS EMPLOYMENT	Applicant 1	Applicant 2
Type of Employment	<input type="checkbox"/> PAYG <input type="checkbox"/> Self-employed <input type="checkbox"/> Not employed	<input type="checkbox"/> PAYG <input type="checkbox"/> Self-employed <input type="checkbox"/> Not employed
Status	<input type="checkbox"/> Full time <input type="checkbox"/> Part time <input type="checkbox"/> Casual <input type="checkbox"/> Contract	<input type="checkbox"/> Full time <input type="checkbox"/> Part time <input type="checkbox"/> Casual <input type="checkbox"/> Contract
Employer Name		
Employer Address		
Employer Contact Name		
Employer Contact Number		
Position		
Time in Position		
Gross Annual Income		
OTHER/PRIOR EMPLOYMENT	Applicant 1	Applicant 2
Type of Employment	<input type="checkbox"/> PAYG <input type="checkbox"/> Self-employed <input type="checkbox"/> Not employed	<input type="checkbox"/> PAYG <input type="checkbox"/> Self-employed <input type="checkbox"/> Not employed

<b>Status</b>	<input type="checkbox"/> Full time <input type="checkbox"/> Part time <input type="checkbox"/> Casual <input type="checkbox"/> Contract		<input type="checkbox"/> Full time <input type="checkbox"/> Part time <input type="checkbox"/> Casual <input type="checkbox"/> Contract		
<b>Employer Name</b>					
<b>Employer Address</b>					
<b>Employer Contact Name</b>					
<b>Employer Contact Number</b>					
<b>Position</b>					
<b>Time in Position</b>					
<b>Gross Annual Income</b>					
<b>INCOME</b>	<b>Current</b>	<b>After Settlement</b>	<b>EXPENSES</b>	<b>Current</b>	<b>After Settlement</b>
<b>Applicant 1: Net Monthly Income</b>			<b>Existing Mortgage</b>		
<b>Applicant 2: Net Monthly Income</b>			<b>Existing Mortgage</b>		
<b>Existing Rental Income –</b>			<b>Car Finance</b>		
<b>Existing Rental Income –</b>			<b>Personal Loan</b>		
<b>Investment Income</b>			<b>Other Loans e.g. HECS - HELP</b>		
<b>Government Payments</b>			<b>Credit Cards at 3% of limit</b>		
			<b>Proposed 'new' Loan</b>		
			Rent or Board		
			Utilities - electricity, rates, gas, water, body corporate		
			Connections - phone, mobile, internet, cable TV		
			Education - child care, private school fees, uniforms & activities		
			Food - groceries, meat, fruit & vegetables		
			Transport - public, petrol, registration, insurance & servicing		
			Medical - private health insurance & ongoing medical bills		
			Insurances - Home & Personal (Life/TPD/Trauma)		
			Household purchases and maintenance		
			Entertainment - dining out, movies, gifts, mag, books		
			Sports, hobbies and memberships		
			Other regular expenditure		
<b>TOTAL MONTHLY INCOME (A)</b>	\$	\$	<b>TOTAL MONTHLY EXPENSES AFTER SETTLEMENT (B)</b>	\$	\$
<b>NET MONTHLY SURPLUS (A – B)</b>					\$

**SELF EMPLOYED BORROWERS (if applicable)**

BUSINESS DETAILS			
Name of Business		ABN	
Type of Entity		Website	
Nature of Business			
Trustee (if applicable)			
Beneficiaries			

FINANCIAL POSITION – BUSINESS ENTITY			
	Latest Financial Year	Previous Financial Year	Comments
Sales			
Less cost of goods sold	( )	( )	
Gross profit	\$	\$	
Operating expenses	( )	( )	
Net Profit Before Tax	\$	\$	
ADDBACKS			
One off expenses			
Interest			
Depreciation			
Directors fees			
Other			
Sub Total	\$	\$	
Less Tax	( )	( )	
<b>TOTAL</b>	<b>\$</b>	<b>\$</b>	

ACCOUNTANT DETAILS	
Business Name	
Accountant Name	
Phone Number	

Are you aware of any future changes to business income that may affect your ability to meet your financial obligations?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
<i>If Yes, please provide further details</i>		

Has the income been consistent in the last two years?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
<i>If No, please provide further details</i>		

TAX RESIDENCY	Applicant 1	Applicant 2
Are you a tax resident of a foreign country?		
If you answered 'Yes' to the above question, please provide your country of tax residency and your citizenship status. (Please note: You will need to provide your Tax Identification Number to the lender as part of your application process)		

CURRENT ASSETS				
Asset	Description	Value	Monthly Income	Ownership
Property 1				<input type="checkbox"/> App 1 <input type="checkbox"/> App 2
Property 2				<input type="checkbox"/> App 1 <input type="checkbox"/> App 2
Property 3				<input type="checkbox"/> App 1 <input type="checkbox"/> App 2
Vehicle 1				<input type="checkbox"/> App 1 <input type="checkbox"/> App 2
Vehicle 2				<input type="checkbox"/> App 1 <input type="checkbox"/> App 2
Bank Account 1				<input type="checkbox"/> App 1 <input type="checkbox"/> App 2
Bank Account 2				<input type="checkbox"/> App 1 <input type="checkbox"/> App 2
Investments				<input type="checkbox"/> App 1 <input type="checkbox"/> App 2
Superannuation				<input type="checkbox"/> App 1 <input type="checkbox"/> App 2
Superannuation				<input type="checkbox"/> App 1 <input type="checkbox"/> App 2
Contents and Valuables				<input type="checkbox"/> App 1 <input type="checkbox"/> App 2
Other				<input type="checkbox"/> App 1 <input type="checkbox"/> App 2
Other				<input type="checkbox"/> App 1 <input type="checkbox"/> App 2
<b>TOTAL ASSETS</b>		\$	\$	

INSURANCE				
Insurance - Home		Insurance - Risk (Possibly in Super)	Life – Insured cover surrender value =\$	
Insurance - Car			IP	
			TPD	
			Trauma	
		Key Man		

CURRENT LIABILITIES							
Liability	Description/lender	Limit	Balance	Monthly Payments	Interest Rate	Remaining Term	To be cleared
Mortgage 1							<input type="checkbox"/> Yes <input type="checkbox"/> No
Mortgage 2							<input type="checkbox"/> Yes <input type="checkbox"/> No
Mortgage 3							<input type="checkbox"/> Yes <input type="checkbox"/> No
Car Finance							<input type="checkbox"/> Yes <input type="checkbox"/> No
Car Finance							<input type="checkbox"/> Yes <input type="checkbox"/> No
Personal Loan							<input type="checkbox"/> Yes <input type="checkbox"/> No
Personal Loan							<input type="checkbox"/> Yes <input type="checkbox"/> No
Credit Card 1							<input type="checkbox"/> Yes <input type="checkbox"/> No
Credit Card 2							<input type="checkbox"/> Yes <input type="checkbox"/> No
HECS/HELP							<input type="checkbox"/> Yes <input type="checkbox"/> No
Other							<input type="checkbox"/> Yes <input type="checkbox"/> No
Other							<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>TOTAL LIABILITIES</b>		\$	\$	\$			
<b>NET ASSETS (Asset Value – Liability Balance)</b>			\$				

REASONS FOR APPLYING FOR CREDIT	
What is the loan amount you are applying for? (if known)	
What is the purpose of the loan?	<input type="checkbox"/> <b>Personal</b> <input type="checkbox"/> <b>Business</b>
Is this a refinance of an existing loan?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If you answered Yes, please provide information on what your objectives are for seeking this?	
How long do you expect to remain in the new Credit Contract?	<input type="checkbox"/> 1 - 3 years <input type="checkbox"/> 3 - 5 years <input type="checkbox"/> 5 - 7 years
What will be your preferred loan repayment frequency?	<input type="checkbox"/> Weekly <input type="checkbox"/> Fortnightly <input type="checkbox"/> Monthly <input type="checkbox"/> Don't mind

CREDIT HISTORY	
<b>Applicant 1:</b> Have you ever had any financial judgments or legal proceedings recorded against you?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If 'yes' please provide details in the response section	<b>Refer below</b>
Are all of your current credit 'finance' commitments up to date?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If 'no' please provide details on how you plan to bring your financial position and/or loan repayments in order/up to date?	Refer below
<i>Response:</i>	
<b>Applicant 2:</b> Have you ever had any financial judgments or legal proceedings recorded against you?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If 'yes' please provide details in the response section	<b>Refer below</b>
Are all of your current credit 'finance' commitments up to date?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If 'no' please provide details on how you plan to bring your financial position and/or loan repayments in order/up to date?	Refer below
<i>Response:</i>	

RISK PROFILE	
<b>Applicant 1:</b> On a scale of 1-10 how would you rate your current job security? (the higher the number, the more secure you feel - 1 is No Secure; 10 is Highly Secure)	
<b>Applicant 2:</b> On a scale of 1-10 how would you rate your current job security? (the higher the number, the more secure you feel - 1 is No Secure; 10 is Highly Secure)	

ANTICIPATED CHANGES TO CIRCUMSTANCES	
Do you anticipate any changes to your income in the next 6-12 months?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you anticipate your expenses will change materially in the next 6-12 months?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are there any other factors that you can think of that may material affect your income and/or expenses in the next 6-12 months?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If you answered Yes to the above questions, please provide further information.	

LENDER PREFERENCE	
Are there any lenders that you don't wish to deal with? (Please provide their name)	
Are you considering having a Balloon Payment or Residual Value in this new Credit Contract?	<input type="checkbox"/> Yes <input type="checkbox"/> No

PROTECTING LIFESTYLE AND ASSETS	
♦ Do you have adequate Life Insurance, Debt and/or Income Protection currently in place?	<input type="checkbox"/> Yes <input type="checkbox"/> No

♦ Do you have adequate insurance to meet your loan repayments and/or outstanding balance (current and/or new) should you not be able to work?	<input type="checkbox"/> Yes <input type="checkbox"/> No
♦ If you answered to any of the above questions, would you like us to arrange a meeting for you to discuss options regarding your insurance needs and requirements?	<input type="checkbox"/> Yes <input type="checkbox"/> No

SECURITY				
Security	Details	Value	Source Of Value	Ownership

ESTIMATED TRANSACTION COSTS			
<b>Refinance/Exit Costs</b> If existing loan is being refinanced		<b>Deposit Proceeds</b>	
<b>Existing Loan Payout</b>		<b>Savings</b>	
<b>Purchase Price</b>		<b>Gift</b>	
<b>Application Fees</b>		<b>Other Funds</b>	
<b>Legal Fees, Stamp Duty, Other costs</b>		<b>NEW LOAN</b>	
<b>TOTAL COSTS</b>	\$	<b>TOTAL FUNDS</b>	\$

**Reminder and Important Notice:**  
The Finance Broker must have reasonable grounds for providing a credit recommendation. Before making this recommendation, the Finance Broker must ask you about your borrowing needs and objectives and current financial situation. The information requested in this form will be used strictly for that purpose. The Finance Broker could make inappropriate recommendations or give inappropriate advice if you fail to fully and accurately complete this form and or disclose your full financial position.

Name	Signature	Date
Applicant 1		
Applicant 2		

## Supporting Documents 'Checklist'

If you would like to proceed with an application for finance, below is a list of the typical documentary requirements:

Required		Obtained
	<b>Identification Verification:</b>	
<input type="checkbox"/>	- Birth Certificate, Passport, Citizenship Certificate, Visa Permit (if new to the country) - Driver Licence, Medicare Card, Credit Card, Debit Card - Utilities Statements: Rates, Electricity, Wates, Telephone	<input type="checkbox"/>
	<b>Current Income Verification:</b>	
	<b>Tax File Numbers MUST be deleted from ALL documentation</b>	
<input type="checkbox"/>	Latest 2 consecutive Payslips (YTD calculation included)	<input type="checkbox"/>
<input type="checkbox"/>	Letter of Employment: Date commenced, employment status, base salary, confirmation of regular allowances/overtime, confirmation of YTD earnings	<input type="checkbox"/>
<input type="checkbox"/>	Latest 2 years Taxation Returns - Personal and correlating ATO notice of assessment	<input type="checkbox"/>
<input type="checkbox"/>	Latest 2 years Taxation Returns - Company, Trust, SMSF and correlating ATO notice of assessment	<input type="checkbox"/>
<input type="checkbox"/>	Last 2 years Group Certificates or Last 2 years Tax Assessment Notices	<input type="checkbox"/>
<input type="checkbox"/>	Latest Centrelink Benefits Statement	<input type="checkbox"/>
<input type="checkbox"/>	Latest Child Support Agency - Income Confirmation Letter and 12 months bank statements confirming regular receipt of payments	<input type="checkbox"/>
<input type="checkbox"/>	Last 3 months Rental Property Income Statements	<input type="checkbox"/>
	<b>Current Lending Verification:</b>	
<input type="checkbox"/>	Last 6 months Loan Statements - Home, Investment Property	<input type="checkbox"/>
<input type="checkbox"/>	Last 6 months Loan Statements - Personal Loans, Car Finance	<input type="checkbox"/>
<input type="checkbox"/>	Last 6 months Business/Company Bank Statements	<input type="checkbox"/>
<input type="checkbox"/>	Last 3 months Credit Card Statements	<input type="checkbox"/>
<input type="checkbox"/>	Credit Card cancellation or Limit Reduction Letter (if applicable)	<input type="checkbox"/>
	<b>Current Asset Verification:</b>	
<input type="checkbox"/>	Council Rates Notice (existing properties: Home / Investment Property)	<input type="checkbox"/>
<input type="checkbox"/>	Latest 3 months Transactional / Savings Account Statements (Income & Salary credited)	<input type="checkbox"/>
<input type="checkbox"/>	Term Deposit or Investment Account Certificate	<input type="checkbox"/>
<input type="checkbox"/>	Share Portfolio documentation or if this has been in receipt for 12 months, last tax return	<input type="checkbox"/>
<input type="checkbox"/>	Superannuation documentation (last statement from fund showing balances)	<input type="checkbox"/>



# Privacy Disclosure Statement and Consent

In handling your personal information, .....Pty Ltd ABN .. ... and its individual representatives are authorised credit representatives of Connective Credit Services Pty Ltd ACN 143 651 496 (Australian Credit Licence 389328) Level 20, 567 Collins Street, Melbourne VIC 3000 Phone: 1300 656 637 is committed to complying with the Privacy Act 1988 and the Australian Privacy Principles.

**How and why we collect your personal information** - We collect personal information from you when you apply for or use our products and services, in particular the products and services you require.

**Providing Your Personal Information to Other Organisations** - In providing products and services to you it may be necessary for us to retain your personal information and provide it to other organisations with which we conduct business. We may exchange the information with the following types of entities, some of which may be located overseas:

- Organisations which provide finance or other products to you or to whom an application has been made
- Finance consultants, accountants and auditors, conveyancers, legal advisers, insurers and mailing services
- Any associates, related entities, contractors and our mortgage aggregator (Connective)
- Any industry body, tribunal, court or otherwise in connection with any complaint regarding our services
- Any person where we are required by law to do so
- Your referees, such as your employer, to verify information you have provided
- Any person considering acquiring an interest in our business or assets
- Any organisation providing online verification of your identity.

**Your rights** - You may gain access to the personal information that we hold about you by contacting us. You can also contact us to obtain a copy of our privacy policy. The policy contains information about how you can access or seek correction of the information we hold about you, how we manage that information and our complaints process.

**If your personal information is not provided** - If you do not provide us with all of the information we request we may be unable to supply to you the product or service that you require.

**Consent to provide your personal information to a credit reporting body (CRB)** - we can act as your agent to obtain a report or information about your consumer or commercial credit worthiness from a (CRB), we may disclose personal information such as your name, date of birth, and address to the CRB to obtain an assessment of whether that personal information matches information held by it.

<input type="checkbox"/> Yes - I/we appoint ....., of ..... Pty Ltd ABN .. ... trading as ..... to obtain a credit report on my/our behalf.
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**Consent to receive marketing Information** - you consent to us doing so & we may provide you with information from time to time about new products and services available to you from us or other businesses with whom we have a relationship. Your consent to our providing this information to you will be implied unless you notify us that you do not wish to receive this information.

I/we do not wish to receive marketing information from ..... <input type="checkbox"/>
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**Consent to receive documents electronically** - you consent to us providing you with documents by electronic communication, you confirm that paper documents may no longer be given and electronic communications must be regularly checked for documents. Consent to the giving of documents by electronic communication may be withdrawn at any time.

I/we do not wish to receive documents electronically from ..... <input type="checkbox"/>
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**By signing this consent you agree that we may collect, use and disclose your information:**

Name: _____	Signature: _____	Date: _____
Address: _____	Date of Birth: _____	Drivers Licence: _____
Name: _____	Signature: _____	Date: _____
Address: _____	Date of Birth: _____	Drivers Licence: _____