

A woman with long dark hair, wearing a dark dress with a light-colored pattern, is looking down at a tablet computer she is holding. The background is a blurred city street at night, with warm bokeh lights from buildings and streetlights. A semi-transparent blue rectangular overlay covers the middle of the image, and a thin green horizontal line is positioned below it.

# FINANCIAL NEEDS ANALYSIS



## Adviser Declaration

I declare that:

- The information contained in this financial needs analysis is an accurate and complete record of the information provided by the client/s and acknowledged by the client/s signing and dating to this effect.
- The client/s was given a copy of the Financial Services Guide before any investment advice or service was provided.
- The preparation of the client/s Statement of Advice will be based on the following information and any other documentation provided.

Adviser signature \_\_\_\_\_

Date \_\_\_\_\_

Please read the important notice below

The Corporations Act requires that an adviser providing financial services advice must have reasonable grounds for providing that advice. This means that the adviser must conduct appropriate inquiries as to the investment objectives, financial situation and particular needs of the person concerned. The information requested in this form is necessary to enable a recommendation to be made on a reasonable basis and will be used for that purpose.

On the following pages we ask questions that satisfy most inquiries about our client's circumstances.

### Attitudes and Abilities

We all have quite a different attitude to debt, investment and savings as well as different abilities to save. How would you describe your own views? For each question, please tick ONE of the following according to whether you agree with the particular statement.

	Yes	No	Not Sure
I/we maintain a written budget			
I/we have a systematic approach to saving money			
I/we are happy with my / our current rate of savings			
My/our investments are structured in the most tax effective way			
My/our current mortgage and / or liabilities are structured in the most tax effective way			
I/we are pleased with the performance of my / our current investments			
Do you have a retirement plan?			
I/we feel that we are on track to retire comfortably			
I/we feel that we are doing the most with our financial resources			
Notes			

### Personal / Family Protection

People have very different levels of financial preparedness for the unexpected or often, even the inevitable. Please indicate whether any of the following applies.

	Yes	No	Not Sure
Myself and my partner / spouse have an up to date Will			
Executor or Proposed Executor			
Enduring Power of Attorney			
I/we have sufficient Life Insurance cover			
I/we have sufficient Income Protection			
I/we have sufficient Total & Permanent Disability cover			
I/we have sufficient Critical Illness cover for medical expenses			
Notes			

### Personal Details

		Client 1	Client 2
Surname			
Given name			
Preferred name			
Date of birth			
Residency			
Marital status			
Home address	Years at address		
Postal address			
Previous address			
Home no.			
Mobile no.			
Work no.			
Email			
Nearest relative not living with you			

Children	Date of Birth	Gender	Relationship

Do you have a current education plan in place for your children?

Is it tax free?

How much do you need?

Notes

## Personal Goals and Financial Objectives

Why are you seeking advice?

Short term goals (less than two years)

1.

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2.

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3.

Medium term goals (two to five years)

1.

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2.

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3.

Long term (more than five years)

1.

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2.

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3.

What does your Financial Peace of Mind mean to you?

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Jointly, please answer/comment on the following questions

What would be your top 2 or 3 concerns regarding your financial situation?

1.

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2.

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3.

How concerned are you about the tax effectiveness of your investments?

How comfortable are you towards borrowing to invest in shares, property or other assets classes?  
Not comfortable? Comfortable? Very comfortable?

Which type of investment assets would you be comfortable with borrowing for if any?  
What are your reasons?

Bearing in mind the preferential taxation rates within superannuation, are you averse to increasing your superannuation investments? If so, what are your reasons?

Would you like better control over your superannuation and retirement planning?

If appropriate and beneficial, are you open to considering a Self-Managed Superannuation Fund or would you prefer to "set and forget" when it comes to superannuation?

How regularly would you like your financial situation monitored /reviewed?

What criteria would you use to assess the success of your financial plans?

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### Retirement Needs

- Not applicable
- Not disclosed by client

	Client 1	Client 2
At what age do you plan to retire?		
How much income per year do you think you will need in retirement?	\$ pa.	\$ pa.
Do you think that your current rate of savings will provide you with the retirement lifestyle you desire?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not sure	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not sure
Do you intend to leave an inheritance to your dependents?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
What source of income do you expect on rely on in retirement? (e.g. part-time work, social security benefits, self-funded)		

Notes



## Employment Details

	Client 1	Client 2
Employer		
What duties do you perform (manual, office etc.)		
PAYG FT / PT / Self-employed / Other (describe)		
Trust details		
Previous occupation		
Employer		

## Lifestyle Details

	Client 1	Client 2
Health	<input type="checkbox"/> Excellent <input type="checkbox"/> Average <input type="checkbox"/> Good <input type="checkbox"/> Poor <input type="checkbox"/> Unknown	<input type="checkbox"/> Excellent <input type="checkbox"/> Average <input type="checkbox"/> Good <input type="checkbox"/> Poor <input type="checkbox"/> Unknown
Smoker	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

## Estate Planning

	Client 1	Client 2
Do you have a will?		
When was it last updated?		
Where is the will located?		
Does it reflect your current wishes?		
Who is your executor?		
Who is your Power of Attorney?		
Do you have a funeral plan?		
Period residence if born outside of Australia		
Have you nominated beneficiaries on your superannuation?		

### Assets and Liabilities

Assets	Current Value	Income Generated	Purchase Value	Purchase Date	Ownership			Existing Liabilities	Interest Rate	Loan Term	Current Repayments	Lender
					Client 1	Client 2	Joint					
Principle residence												
Investment property												
Investment property												
Investment property												
Shares/Investment												
Shares/Investment												
Motor vehicles												
Motor vehicles												
Home contents												
Business interests												
Credit cards												
Credit cards												
Cash/Bank accounts												
Cash/Bank accounts												
Cash/Bank accounts												
Other assets												
<b>Total</b>	<b>\$</b>	<b>\$</b>	<b>\$</b>					<b>\$</b>			<b>\$</b>	

Do you repay your credit cards at the end of the interest free period?

## Superannuation Details

Please note: use the super/insurance research form to record all current super and insurance specifics

Client 1				
	Fund 1	Fund 2	Fund 3	Fund 4
Super fund name				
Type of fund				
Policy no.				
Current balance				
Contributions (self)				
Employer contributions				
Investment options				
Super components (untaxed, taxable, tax free etc)				
Do you have insurance cover? (please detail on next page)	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

Client 2				
	Fund 1	Fund 2	Fund 3	Fund 4
Super fund name				
Type of fund				
Policy no.				
Current balance				
Contributions (self)				
Employer contributions				
Investment options				
Super components (untaxed, taxable, tax free etc)				
Do you have insurance cover? (please detail on next page)	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

### Existing Insurance Policies

Client 1								
Insurance Provider	Sums Insured				Annual Premium	Owner (personal or in super)	Waiting Period	Benefit Period
	IP Cover	Life Cover	TPD Cover	Trauma Cover				
	\$ pm	\$	\$	\$	\$			
	\$ pm	\$	\$	\$	\$			
	\$ pm	\$	\$	\$	\$			
	\$ pm	\$	\$	\$	\$			
	\$ pm	\$	\$	\$	\$			
	\$ pm	\$	\$	\$	\$			
	\$ pm	\$	\$	\$	\$			
	\$ pm	\$	\$	\$	\$			
Total	\$	\$	\$	\$	\$			

Client 2								
Insurance Provider	Sums Insured				Annual Premium	Owner (personal or in super)	Waiting Period	Benefit Period
	IP Cover	Life Cover	TPD Cover	Trauma Cover				
	\$ pm	\$	\$	\$	\$			
	\$ pm	\$	\$	\$	\$			
	\$ pm	\$	\$	\$	\$			
	\$ pm	\$	\$	\$	\$			
	\$ pm	\$	\$	\$	\$			
	\$ pm	\$	\$	\$	\$			
	\$ pm	\$	\$	\$	\$			
	\$ pm	\$	\$	\$	\$			
Total	\$	\$	\$	\$	\$			

Notes

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## Income and Expenses Summary

Income	Client 1		Client 2	
Salary/Wages (before tax)	\$	pa	\$	pa
Gross property income	\$	pa	\$	pa
Investment income	\$	pa	\$	pa
Centrelink income	\$	pa	\$	pa
<b>Total</b>	<b>\$</b>	<b>pa</b>	<b>\$</b>	<b>pa</b>
<b>Total annual income after tax</b>	<b>\$</b>	<b>pa</b>	<b>\$</b>	<b>pa</b>
Expenses	Monthly		Annually	
Mortgage repayments	\$	pm	\$	pa
Personal loan repayments	\$	pm	\$	pa
Car loan payments	\$	pm	\$	pa
Other loan payments	\$	pm	\$	pa
Housing costs	\$	pm	\$	pa
Utilities electricity/gas etc.	\$	pm	\$	pa
Car expenses	\$	pm	\$	pa
Food	\$	pm	\$	pa
Clothing	\$	pm	\$	pa
Personal/Entertainment (dining out, movies, tickets)	\$	pm	\$	pa
Insurances	\$	pm	\$	pa
Super contributions	\$	pm	\$	pa
Medical/Pharmacy	\$	pm	\$	pa
Holidays	\$	pm	\$	pa
Education	\$	pm	\$	pa
Kids sports and hobbies	\$	pm	\$	pa
Professional fees (accounting, finance, legal)	\$	pm	\$	pa
Regular savings	\$	pm	\$	pa
<b>Total</b>	<b>\$</b>	<b>pm</b>	<b>\$</b>	<b>pa</b>
<b>Surplus cashflow</b>	<b>\$</b>	<b>pm</b>	<b>\$</b>	<b>pa</b>

Notes

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Do you anticipate any changes (either an increase or decrease) in your expenditure over the next 12 months?

Are you comfortable meeting your current mortgage or other debt repayments?

How would you pay the mortgage/bills if your income stopped?

What safety net do you currently have in place?

Notes

## Life Insurance Needs Analysis

Lumps sum cover	Life cover		TPD cover		Trauma cover	
	Client 1	Client 2	Client 1	Client 2	Client 1	Client 2
Smoker (yes/no)						
Annual expenses						
Number of years to replace expenses						
Indexation						
Rate of return of expenses						
<b>Total capital required to replace expenses</b>						
Which liabilities to be covered						
Funeral/Medical costs						
Education expenses						
Other expenses						
<b>Capital for adequate cover</b>						
Superannuation offset						
Non-super investment offset						
Other provisions						
Existing cover (to be retained)						
<b>Total proceeds available</b>						
<b>Shortfall of capital (Gap)</b>	\$	\$	\$	\$	\$	\$

## Income Protection

Ongoing cover	Client 1	Client 2
Current income		
Percentage of income to cover		
Super contributions to be covered		
Annual income covered		
Monthly benefit		

### Asset Operating Costs & Expenses

Assets	Rates (land, water, strata)	Insurances (home, car)	Maintenance	Fees (agent etc.)	Registration	Running costs	Other costs	Total costs
Principal residence	\$	\$	\$	\$	\$	\$	\$	\$
Investment property	\$	\$	\$	\$	\$	\$	\$	\$
Investment property	\$	\$	\$	\$	\$	\$	\$	\$
Investment property	\$	\$	\$	\$	\$	\$	\$	\$
Shares/Investments	\$	\$	\$	\$	\$	\$	\$	\$
Motor vehicles	\$	\$	\$	\$	\$	\$	\$	\$
Motor vehicles	\$	\$	\$	\$	\$	\$	\$	\$
Caravan/Boat	\$	\$	\$	\$	\$	\$	\$	\$
<b>Total</b>	<b>\$</b>	<b>\$</b>	<b>\$</b>	<b>\$</b>	<b>\$</b>	<b>\$</b>	<b>\$</b>	<b>\$</b>

### Bank account information

Name of bank account	For what purpose do you use this account? (what bills do you pay, does income go to this account, is it linked to other accounts)





## Risk Profile Questionnaire

Question	Client 1	Client 2	Score
1. What kind of risk taker would you typically describe yourself as?			
Low			10
Moderately low			20
Average			30
Moderately high			40
High			50
2. When you think of the word 'risk', what word describes your thoughts?			
Excitement			50
Opportunity			40
Caution			30
Uncertainty			20
Danger			10
3. How do you manage when faced with an important decision?			
I enjoy being the decision maker			50
I am confident I will make the right decision			40
I wonder what the right decision is			30
I worry whether I will make the right decision			20
I prefer not to be the decision maker			10
4. When faced with a financial decision, what are you most concerned about?			
Always the possible gains			50
Usually the possible gains			40
Neutral			30
Usually the possible losses			20
Always the possible losses			10
5. Imagine you were in a job where you could choose between salary, bonus, or a mix of both. Which would you choose?			
Salary of \$70,000			10
Salary of \$65,000 with potential bonus of \$15,000			20
Salary of \$60,000 with a potential bonus of \$30,000			30
Salary of \$50,000 with a potential bonus of \$50,000			40
Salary of \$40,000 with a potential bonus of \$100,000			50
<b>Total score Question 1 - 5</b>			

Question	Client 1	Client 2	Score
<b>6. How familiar are you with investment markets?</b>			
Very little understanding or interest			10
Not very familiar			20
Have had enough experience to understand the importance of diversification			30
I understand that markets may fluctuate and that different sectors offer different income, growth and taxation characteristics			40
I am an experienced investor with all investment classes and understand the factors that may influence performance			50
<b>7. For how long would you expect most of your money to be invested, before you would need to access capital</b>			
Less than 12 months			10
Between 1 and 3 years			20
Between 3 and 5 years			30
Between 5 and 7 years			40
Longer than 7 years			50
<b>8. Are you likely to need access to the funds during the term if the investments? (For superannuation investors, please tick no)</b>			
Yes			-50
No			0
<b>9. How would you react if your investment value dropped by 20%, six months after placing your investments?</b>			
You would invest more funds to take advantage of the lower investment prices expecting future growth			50
You would leave your investments in place, expecting performance to improve, as this was a risk you understood			40
You would be concerned, but would wait to see if the investments improve			30
You would cut your losses and transfer your funds to more secure investment sectors			20
You would move the entire investment to cash - security of your capital is critical and you do not intend to take risks			10
<b>10. What is the most aggressive investment you've ever made?</b>			
Bank account			10
Own home			20
Investment property			30
Managed funds			40
Shares			50
<b>Total score Question 6 - 10</b>			

Question	Client 1	Client 2	Score
11. Which of the following best describes your purpose for investing?			
You want to protect the value of your investment capital			10
You have some specific objectives within the next 5 years for which you want to accumulate sufficient funds			20
You are nearing retirement and you are investing to ensure you have sufficient funds available to enjoy your retirement			20
You have a lump sum (e.g. inheritance or a superannuation rollover payment from your employer) and you are uncertain about what sort of investment alternatives are available			30
You are not nearing retirement, have surplus funds to invest and are aiming to accumulate long term wealth from a balanced portfolio			40
You have an investment time frame of over 5 years. You are mainly investing for growth to accumulate long-term wealth			50
12. Imagine you have set a goal to retire at a particular age and have also determined the lifestyle you would like in retirement. Your financial adviser informs you that, in order to achieve the desired lifestyle if you are to retire at that specific age, you would need to make investments of a higher risk than you would normally be comfortable with. Which of the following options would you feel most comfortable with?			
I would rather alter my retirement goals than take on any more risk			10
I would take a combination of higher risk investments as well as altering my retirement goals			30
I would rather take a higher risk investment than alter my retirement goals			50
13. Have you ever borrowed money to invest?			
Yes			50
No			0
14. How do you feel about borrowing money to invest?			
I am not willing to consider this option			10
I am concerned			20
I am open to this strategy			30
I am comfortable			40
I am very comfortable			50
<b>Total score Question 11 - 14</b>			

**How did you score?**

Total risk tolerance score	Client 1	Client 2
Carefully add up your scores based on the answers you selected		
Questions 1-5		
Questions 6-10		
Questions 11-14		
Total score		

**Your risk profile outcome**

To determine your risk profile based on your score, simply select the corresponding 'total score range' below.

Total score range	Risk profile	Client 1	Client 2
70-200	Defensive (10% growth/90% defensive)	<input type="checkbox"/>	<input type="checkbox"/>
201-300	Conservative (30% growth/70% defensive)	<input type="checkbox"/>	<input type="checkbox"/>
301-400	Conservative growth (50% growth/50% defensive)	<input type="checkbox"/>	<input type="checkbox"/>
401-525	Balanced (70% growth/30% defensive)	<input type="checkbox"/>	<input type="checkbox"/>
526-650	Growth (90% growth/10%defensive)	<input type="checkbox"/>	<input type="checkbox"/>

Client Notes

## Risk Profile Description

Profile	Objectives	Suitability	Standard Risk Measure	Timeframe
Defensive G/D: 10/90	You have a very low tolerance to risk. You are seeking returns above cash rates.	You would prefer investment in defensive assets, including cash and fixed interest investments, with a focus on preserving your capital.	1 time (in any 20 year period)	1-3 years
Conservative G/D: 30/70	You have a low to moderate tolerance to risk, seeking regular income and the opportunity for some capital growth.	You would generally prefer an investment mix that is positioned defensively, with a higher proportion invested in cash and fixed interest, and a smaller proportion in shares and property.	2 times (in any 20 year period)	2-4 years
Conservative growth G/D: 50/50	You have a moderate tolerance of risk. You are seeking some capital growth over the medium term, but prefer not to have large fluctuations in short-term.	You would prefer investment across both defensive assets of cash and fixed interest, as well as growth assets of shares and property.	3 times (in any 20 year period)	3-5 years
Balanced G/D: 70/30	You have a moderate risk tolerance, seeking capital growth over the medium to long term, with an acceptance of some volatility in your portfolio over the short-term.	You would prefer investment in a diversified portfolio, with a bias toward growth assets of shares and property.	4 times (in any 20 year period)	5-7 years
Growth G/D: 90/10	You are prepared to accept short-term fluctuations for potentially higher returns. You focus on assets with greater growth potential.	You would prefer investment with high exposure to growth assets, with a small portion of defensive assets.	5 times (in any 20 year period)	7+ years

^ Source: MLC. MLC has used the Standard Risk Measure (SRM) to provide you with the estimated number of negative annual returns in any 20 year period. Because it's an estimate, the actual number of negative returns that occur in a 20 year period may be different. The SRM is based on industry guidelines, however, it is not a complete assessment of investment risk. For example: it does not capture the size of a possible negative return, or the potential for sufficient positive returns to meet your objectives; it does not take into account the impact of fees and tax, which can increase the chance of a negative return. Information on how SMR is calculated is available on [mlc.com.au/srm](http://mlc.com.au/srm).

### **Your risk profile and declarations**

Reasons for selection:

- I am satisfied with the risk profile outcome, based on my score and discussions with my financial partner
- I am not comfortable with the risk profile outcome based on the scores, and have nominated an alternative option that I feel better reflects my attitude to risk and return (please specify below)

Adviser Notes

For couples with joint investment only

Where there is a difference between Client 1 and Client 2 risk profiles, with joint investments:

- We would prefer our joint investments to be in line with Client 1's risk profile
- We would prefer our joint investments to be in line with Client 2's risk profile
- We would prefer our joint investments to be in between each of our risk profiles

### Client Declaration

I/we confirm the information contained in this form is true and correct to the best of my knowledge. I give permissions for this information to be used for the provision of advice and I understand that the investment recommendations will be based on the information supplied in this form.

In understand the concept of risk and return, and acknowledge that the risk profile agreed to is an adequate reflection of my tolerance of investment risk.

	Signature	Date
Client 1		
Client 2		

### Declaration & Acknowledgments

#### Information in this form

The information provided in this form (Financial Needs Analysis and any supplementary pages & documents) is complete and accurate at the time of completion to the best of my/our knowledge (except where I/we have indicated that I/we have chosen not to provide the information). I/We understand and acknowledge that by either not fully or accurately completing the Financial Needs Analysis and any supplementary pages, any recommendation or advice given by the adviser in these circumstances may be inappropriate to my/our needs and that I/we risk making a financial commitment that may be inappropriate for the needs identified.

#### Scope of our advice

I/We agree to the scope of advice we require as set out in this Financial Needs Analysis.

#### Statement of Advice Fee

I/We agree to pay a Statement of Advice Fee of \$\_\_\_\_\_

#### Financial Services Guide

I/We have read and understood the Financial Services Guide version \_\_\_\_\_ dated \_\_\_\_\_ given to me/us on \_\_\_\_\_ prior to obtaining financial planning services and/or recommendations.

#### Consent to retention and use of Tax File Number(s)

I/We give consent to you retaining my/our tax file number(s), as provided below, and providing it to financial institutions as requested or as necessary.

TFN Client 1: \_\_\_\_\_

TFN Client 2: \_\_\_\_\_

#### Authority for current Adviser

I/We authorise \_\_\_\_\_ of \_\_\_\_\_ to contact any of my/our existing advisers whose details I/we have provided.

#### Receiving Documents Electronically

Where required, your financial adviser will provide you with and may refer back to the following documents:

- **Financial Services Guide (FSG)** provides information to enable you to decide whether to obtain financial services from us.
- **Statement of Advice (SoA)** sets out tailored strategic and/or product recommendations aimed at achieving your goals and objectives.
- **Product Disclosure Statements (PDS)** in the event a financial product has been recommended. The PDS sets out general risks, features and fees of the product(s) being recommended to you.
- **Fee Disclosure Statement (FDS)** outlines the fees that we have received over a 12 month period, the services you expected and the services that we delivered.



Receipt of Document(s):

I/we wish to obtain the following documents in printed form:

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**Information and Privacy Agreement**

I/We agree that:

1. I am/we are to receive financial planning services from the adviser named in this Financial Needs Analysis ["**adviser**"] and understand that my/our personal information (including any sensitive information such as health information and membership of professional organisations ["**sensitive information**"]) is being collected primarily for that purpose.
2. I/We acknowledge the privacy notification in the Financial Services Guide, that I/we have access to the Privacy Policy and understand that my/our personal information will be used and disclosed as outlined in the Policy available from my/our adviser.
3. I/We also consent to the disclosure of my/our personal information (including my/our sensitive information):
  - to organisations involved in providing my/our adviser with marketing services and to their service providers (for example posting services), so that my/our adviser may offer me/us products and services that might meet my/our financial needs; and
  - to other organisations in connection with the sale or proposed sale of all or part of the adviser's business and to the use of that personal information by those organisations for those purposes.
  - to other professionals who may need to be engaged in order to implement certain components of my/our adviser's business succession advice.
4. I/We also consent to the collection of my/our personal information for the purpose of my/our adviser providing the services stated above. This consent also relates to my/our sensitive information.
5. If I/we have provided personal information about an individual (such as a partner, dependant, employer or accountant) I/we have or will as soon as practicable, provide the individual with a copy of the **Financial Service Guide** which includes how you manage personal information and make them aware that this section applies to their personal information that has been collected for the purpose of my/our adviser providing me/us with the financial advice I/we have requested.
6. If I/we have provided sensitive information about someone else, I/we have or will obtain the consent of that person to that information being collected by my/our adviser and my/our adviser's service providers.
7. I consent to the release of my personal information (including my sensitive information) to my spouse or partner.

Name	Signature	Date
Client 1:		
Client 2:		
Adviser:		

## Documentation Required for Paraplanning

Below is a list of items that you will need to obtain during the first data-gather meeting with your client. The things you are required to obtain may not be limited to this list.

To submit	Done
Financial Needs Analysis (FNA/Fact Find) – Paper or loaded into Midwinter. Completed to level required for the scope of advice agreed upon. To be included, assets, liabilities, budget/cashflow, detailed client goals. Generate a reverse FNA/Fact Find in Midwinter. Signed client declaration form.	
Signed Terms of Engagement with Fee payment form completed.	
Risk Profile Questionnaire (If Applicable) – with robust notes detailing conversation.	
Insurance Needs calculations: either paper based calculation/excel spreadsheet or needs analysis completed in Midwinter.	
File Notes: outlining client conversation including personal and financial objectives and any strategies discussed with clear instructions to Paraplanning (including well articulated Best Interest Duty. Uploaded into Midwinter – using the File note template outlined by Dealer Group.	
Product Comparison research. 3 products to be researched and evidenced on file/midwinter. Comparisons of old to new product also evidenced in file as well as why recommended product chosen.	
Insurance Quotes (If applicable) plus any existing insurance research	
Signed Authority to Information Release Form (Third Party Authority) indicate when this was sent to the product providers	
Signed Change of Adviser Letter. Uploaded to midwinter and sent off to the provider/s concerned	
Super Research and a copy of All Recent Superannuation Statements (with Balance/Investment option/Insurance and premium listed PLUS Super components i.e. untaxed, taxable etc.) or Super research with all these details recorded	
Copy of All Most Recent Life Insurance Schedules	
Certified Photo Identification	
Personal Recent Pay slips and Tax Returns (if self-employed)	
Copy of All Most Recent Investment Statements (if applicable)	
Business Profit & Loss Statements (if self-employed)	
Self-Managed Super Fund trust deed and Investment Strategy (if applicable)	

### Authority to Disclose Information

**Client Details**

Name			
DOB			
Address			
State		Postcode	

Previous Address 1

Previous Address 2

**Please note that I am the owner of Policy / Account Numbered:**

\_\_\_\_\_

\_\_\_\_\_

**I authorise  
and its named employees to receive any information or documentation requested:**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Please note this does not authorise  
to have any dealings with my / our property/account, only information relating to same.**

Regards

Name	
Signature	
Date	

### Authority to Disclose Information

**Client Details**

Name			
DOB			
Address			
State		Postcode	

Previous Address 1

Previous Address 2

**Please note that I am the owner of Policy / Account Numbered:**

\_\_\_\_\_

\_\_\_\_\_

**I authorise  
and its named employees to receive any information or documentation requested:**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Please note this does not authorise  
to have any dealings with my / our property/account, only information relating to same.**

Regards

Name	
Signature	
Date	

Date: \_\_\_\_\_

Attention:

Dear Sir/Madam

RE CHANGE OF POLICY AND FINANCIAL ADVISER

Please change my policies as listed below:

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To my new Adviser:

Name \_\_\_\_\_

Address \_\_\_\_\_

Contact number \_\_\_\_\_

Adviser Code \_\_\_\_\_

Please ensure that all existing Adviser Service Fees, Remuneration or Commission be transferred to the Adviser listed above.

Kind regards,

\_\_\_\_\_  
(Client Name)

\_\_\_\_\_  
(Client Name)

**Notes**

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**Notes**

**Notes**

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