

# Financial Planning Questionnaire

Private and Confidential

**Hather Financial Services Ltd**  
**Old Passenger Station**  
**Lazonby**  
**Penrith**  
**Cumbria**  
**CA10 1BD**

Hather Financial Services Ltd.  
————— for all your insurance and investment needs —————

Adviser

Fact Find Date

Hather Financial Services Ltd is directly authorised and regulated by the Financial Conduct Authority

# 1 Personal Details

## Client Details

	Self	Partner
Client ID	<input type="text"/>	<input type="text"/>
Surname	<input type="text"/>	<input type="text"/>
Forenames	<input type="text"/>	<input type="text"/>
Title	<input type="text"/>	<input type="text"/>
Salutation	<input type="text"/>	<input type="text"/>
Date of Birth	<input type="text"/> Age <input type="text"/>	<input type="text"/> Age <input type="text"/>
State Pension Age	<input type="text"/>	<input type="text"/>
Marital Status	<input type="text"/>	<input type="text"/>
Sex	<input type="text"/>	<input type="text"/>
National Insurance Number	<input type="text"/>	<input type="text"/>
Tax Reference	<input type="text"/>	<input type="text"/>
Nationality	<input type="text"/>	<input type="text"/>
Country Of Residence	<input type="text"/>	<input type="text"/>
UK Resident For Tax	<input type="text"/>	<input type="text"/>
UK Resident Since	<input type="text"/>	<input type="text"/>
UK Domicile For Tax	<input type="text"/>	<input type="text"/>
Is Vulnerable Client	<input type="text"/>	<input type="text"/>
Client is Politically Exposed	<input type="text"/>	<input type="text"/>
Do you smoke	<input type="text"/>	<input type="text"/>
What do you smoke?	<input type="text"/>	<input type="text"/>
State of Health	<input type="text"/>	<input type="text"/>
- Details	<input type="text"/>	<input type="text"/>
Intended Retirement Age	<input type="text"/>	<input type="text"/>
Intend To Live Abroad	<input type="text"/>	<input type="text"/>
- Details	<input type="text"/>	<input type="text"/>

## Contact Details

	Self	Partner
Home Address	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>
Postcode	<input type="text"/>	<input type="text"/>

## 1 Personal Details(Continued)

Date Moved Here	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
Accommodation Type	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
On Electoral Roll	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
Home Telephone	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
Work Telephone	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
Mobile Telephone	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
Other Telephone 1	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
Email Address	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
Preferred Contact Method	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>

## Previous Addresses

Address	<input style="width: 100%;" type="text"/>	Date Moved Here	<input style="width: 100%;" type="text"/>
	<input style="width: 100%;" type="text"/>	Accommodation Type	<input style="width: 100%;" type="text"/>
	<input style="width: 100%;" type="text"/>	Client(s)	<input style="width: 100%;" type="text"/>
	<input style="width: 100%;" type="text"/>		
Postcode	<input style="width: 100%;" type="text"/>		

Address	<input style="width: 100%;" type="text"/>	Date Moved Here	<input style="width: 100%;" type="text"/>
	<input style="width: 100%;" type="text"/>	Accommodation Type	<input style="width: 100%;" type="text"/>
	<input style="width: 100%;" type="text"/>	Client(s)	<input style="width: 100%;" type="text"/>
	<input style="width: 100%;" type="text"/>		
Postcode	<input style="width: 100%;" type="text"/>		

## Children & Other Dependants

Name	Sex	Date of Birth	Dependent On	Anticipated Age Of Independence	Relationship	Financially Dependant

# 1 Personal Details(Continued)

## Employment Details

	Self	Partner
Employment Status	<input type="text"/>	<input type="text"/>
Occupation	<input type="text"/>	<input type="text"/>
Occupation Type	<input type="text"/>	<input type="text"/>
Employment / Business Start Date	<input type="text"/>	<input type="text"/>
Time in Employment / Time Trading	<input type="text"/>	<input type="text"/>
Contract Type	<input type="text"/>	<input type="text"/>
Details of probationary period, if any	<input type="text"/>	<input type="text"/>
Do you intend to change job in the future	<input type="text"/>	<input type="text"/>
If yes, give details	<input type="text"/>	<input type="text"/>
Payment Frequency	<input type="text"/>	<input type="text"/>
Name of Employer / Business	<input type="text"/>	<input type="text"/>
Business Type	<input type="text"/>	<input type="text"/>
Business Year End	<input type="text"/>	<input type="text"/>
Are you a controlling director	<input type="text"/>	<input type="text"/>
Employer / Business Address	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>
Postcode	<input type="text"/>	<input type="text"/>
Employer / Business Telephone	<input type="text"/>	<input type="text"/>

## 1 Personal Details(Continued)

### Contractor Details

	Self	Partner
Current Contract Rate	<input type="text"/>	<input type="text"/>
Contract Rate Frequency	<input type="text"/>	<input type="text"/>
Contracted Hours per week	<input type="text"/>	<input type="text"/>
Contract Start Date	<input type="text"/>	<input type="text"/>
Contract End Date	<input type="text"/>	<input type="text"/>
Number of Years Contracting	<input type="text"/>	<input type="text"/>
Your Ltd Company Name	<input type="text"/>	<input type="text"/>
Your Ltd Company Address	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>
Postcode	<input type="text"/>	<input type="text"/>
Your Ltd Company Registration	<input type="text"/>	<input type="text"/>
Date of Incorporation	<input type="text"/>	<input type="text"/>

## 2 Financial Circumstances

Please indicate the relative importance of the following needs / objectives on a scale of 1 to 5.

**1 - Very Important      5 - Of Little Importance**

	Self	Partner	Adviser
<input type="checkbox"/> Providing for dependants in the event of your death or serious illness	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="checkbox"/> Repaying mortgage in the event of your death or serious illness	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="checkbox"/> Replacing income if unable to work due to injury, illness or unemployment	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="checkbox"/> Mortgage Needs	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="checkbox"/> Providing medical care	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="checkbox"/> Investment planning	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="checkbox"/> Planning a secure retirement	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="checkbox"/> Providing for practical help in old age	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="checkbox"/> Inheritance tax planning	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="checkbox"/> Equity release	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="checkbox"/> General insurance	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="checkbox"/> Retirement Options & Pension Unlocking	<input type="text"/>	<input type="text"/>	<input type="text"/>

## 2 Financial Circumstances(Continued)

What are you looking to achieve today

	Self	Partner
Have you ever had a mortgage or loan application refused	<input type="text"/>	<input type="text"/>
Are you up to date with your monthly repayments	<input type="text"/>	<input type="text"/>

### Credit Problem 1

Problem Type	<input type="text"/>	Date of Problem	<input type="text"/>
Owner	<input type="text"/>	Amount	<input type="text"/>
Date Satisfied	<input type="text"/>		
Creditor	<input type="text"/>		
Account Number	<input type="text"/>	Date Borrowed	<input type="text"/>
Amount Borrowed	<input type="text"/>		
Repayment Amount	<input type="text"/>	Repayment Frequency	<input type="text"/>

### Credit Problem 2

Problem Type	<input type="text"/>	Date of Problem	<input type="text"/>
Owner	<input type="text"/>	Amount	<input type="text"/>
Date Satisfied	<input type="text"/>		
Creditor	<input type="text"/>		
Account Number	<input type="text"/>	Date Borrowed	<input type="text"/>
Amount Borrowed	<input type="text"/>		
Repayment Amount	<input type="text"/>	Repayment Frequency	<input type="text"/>

## 2 Financial Circumstances(Continued)

### Credit Problem 3

Problem Type	<input type="text"/>	Date of Problem	<input type="text"/>
Owner	<input type="text"/>	Amount	<input type="text"/>
Date Satisfied	<input type="text"/>		
Creditor	<input type="text"/>		
Account Number	<input type="text"/>	Date Borrowed	<input type="text"/>
Amount Borrowed	<input type="text"/>		
Repayment Amount	<input type="text"/>	Repayment Frequency	<input type="text"/>

	Self	Partner
Have you made a Will	<input type="text"/>	<input type="text"/>
If Yes, where is your Will held	<input type="text"/>	<input type="text"/>
Are your Wills up to date	<input type="text"/>	<input type="text"/>
Would you like your Will reviewed	<input type="text"/>	<input type="text"/>
Do you have a Power of Attorney in place	<input type="text"/>	<input type="text"/>
If Yes, what are the details	<input type="text"/>	<input type="text"/>

## 3 Health & Lifestyle

### Health

	Self	Partner
Units Of Measurement (Height & Weight)	<input type="text"/>	<input type="text"/>
Height (Imperial)	<input type="text"/> ft <input type="text"/> in	<input type="text"/> ft <input type="text"/> in
Height (Metric)	<input type="text"/> cm	<input type="text"/> cm
Weight (Imperial)	<input type="text"/> st <input type="text"/> lb	<input type="text"/> st <input type="text"/> lb
Weight (Metric)	<input type="text"/> kg	<input type="text"/> kg
Waist	<input type="text"/> cm	<input type="text"/> cm
BMI	<input type="text"/> kg / m <sup>2</sup>	<input type="text"/> kg / m <sup>2</sup>
State of Health	<input type="text"/>	<input type="text"/>
- Details	<input type="text"/>	<input type="text"/>

### 3 Health & Lifestyle(Continued)

#### Lifestyle

	Self	Partner
Do you smoke	<input type="text"/>	<input type="text"/>
Have you ever used any tobacco or nicotine replacement products?	<input type="text"/>	<input type="text"/>
Have you used any tobacco or nicotine replacement products in the last 12 months?	<input type="text"/>	<input type="text"/>
Have you used any tobacco or nicotine replacement products in the last 5 years?	<input type="text"/>	<input type="text"/>
What do you smoke?	<input type="text"/>	<input type="text"/>
How many do you smoke a day?	<input type="text"/>	<input type="text"/>
Units of Alcohol Consumed per Week	<input type="text"/>	<input type="text"/>
In the last 10 years have you used any recreational drugs? e.g. Ecstasy, Cocaine, Cannabis	<input type="text"/>	<input type="text"/>
Participate in Hazardous Sports or Activities	<input type="text"/>	<input type="text"/>
Details of Hazardous Sports / Activities	<input type="text"/>	<input type="text"/>



### 3 Health & Lifestyle(Continued)

#### Medical History

	Self	Partner
Has any previous application for life/health insurance ever been declined?		
Describe any current medical conditions and treatments		
Do you smoke		
Have you visited hospital or consultant in the last 5 years?		
Have your parents, brothers or sisters died/suffered from disease(s) before the age of 65?		
If yes, please provide details of the condition(s)		
Are you currently experiencing any symptoms or complaints for which you have not consulted a doctor?		
If yes, please provide the details		
Are you currently awaiting, or been advised to seek, any medical or surgical consultation?		
If yes, please provide the details		
Have you received treatment or advice relating to any type of cancer in the last 5 years?		
If yes, please provide the details of the condition such as date of diagnosis, treatment details, and the current status of the condition		
Have you received treatment or advice relating to any type of heart or circulatory condition in the last 5 year?		
If yes, please provide the details of the condition such as date of diagnosis, treatment details, and the current status of the condition		
Have you received treatment or advice relating to any psychiatric, mental, or illness condition in the last 5 years?		
If yes, please provide the details of the condition such as date of diagnosis, treatment details, and the current status of the condition		

### 3 Health & Lifestyle(Continued)

Have you received treatment or advice relating to any joint problems in the last 5 years?		
If yes, please provide the details of the condition such as date of diagnosis, treatment details, and the current status of the condition		
In the last 5 years, have you attended any other medical appointment?		
If yes, please provide the details		
In the last 5 years, have you taken any other tests or medication?		
If yes, please provide the details		
In the last 5 years, have you received any other treatments?		
If yes, please provide the details		

### 4 Income & Expenditure

#### Net Monthly Income

	Self	Partner	Joint	Total
Net Take Home Pay				
Net Drawings				
Net Pension Income				
Net Investment Income				
<b>Total Net Monthly Income</b>				

	Self	Partner
Highest Rate Of Tax		
Is High Rate Tax Payer		
Significant Change in Income Expected		
- Details		
Salary Review Date		
Do you earn any income in a Foreign Currency?		
- Details		

## 4 Income & Expenditure(Continued)

### Monthly Expenditure

	Self	Partner	Joint	Total
Mortgages & Rent	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Loans & Credit	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Pensions, Savings & Insurance	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Household & Utilities	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Travel & Transport	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Discretionary & Leisure	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Child Care	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<b>Total Monthly Expenditure</b>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

**Surplus Income (Net Monthly Income – Monthly Expenditure)**

	Self	Partner
Significant Change in Expenditure Expected	<input type="text"/>	<input type="text"/>
- Details	<input type="text"/>	<input type="text"/>

### Gross Annual Income - Self

Basic Salary	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<b>Total Gross Annual Income</b>	<input type="text"/>

## 4 Income & Expenditure(Continued)

### Gross Annual Income - Partner

Basic Salary	
Total Gross Annual Income	

## 5 Existing Policies

### Protection Policies

Life	Provider	Policy Number	Policy Type	Regular Premium	Single Premiums	Policy Status	Waiver	In Trust	Term & End Date	Value On Death	CIC

### Pension Policies

Life	Provider	Policy Number	Policy Type	Regular Contribution	Single Contributions	Policy Status	Waiver	Death Benefits	Last Valuation [Transfer Val.]

### Savings & Investment Policies

Owner	Provider	Policy Number	Policy Type	Regular Premium	Single Premiums	Policy Status	In Trust	Last Valuation

### Personal Insurance Policies

Owner	Provider	Policy Number	Policy Type	Regular Premium	Single Premiums	Policy Status	Term & End Date	Sum Assured

## 5 Existing Policies(Continued)

### Pension Annuities

	Owner	Provider	Policy Number	Policy Type	Policy Status	Current Income	Spouse's %	Spouse's Commenced	Last Valuation

### Buildings & Contents Policies

	Owner	Provider	Policy Number	Policy Type	Regular Premium	Single Premiums	Policy Status	Term & End Date	Buildings	Contents	Legal

## 6 Assets & Liabilities

### Existing Mortgages

#### Mortgage Details 1

Borrower	<input type="text"/>		
Provider	<input type="text"/>		
Mortgage Type	<input type="text"/>	Equity	<input type="text"/>
Outstanding Mortgage	<input type="text"/>	Start Date	<input type="text"/>
Property Valuation	<input type="text"/>	End Date	<input type="text"/>
Property Price	<input type="text"/>		
Property Use	<input type="text"/>	Interest Type	<input type="text"/>
Monthly Repayment	<input type="text"/>	Interest Rate	<input type="text"/>
Repayment Method	<input type="text"/>		
Property Address	<input type="text"/>		
Mgmt. Comp. Address	<input type="text"/>		
Building Type	<input type="text"/>	Number of Reception Rooms	<input type="text"/>
Year Built	<input type="text"/>	Number of Bedrooms	<input type="text"/>
Number of Conservatories	<input type="text"/>		
Account Number	<input type="text"/>	Deal Expiry Date	<input type="text"/>
Redemption Penalties	<input type="text"/>	Expiry Date	<input type="text"/>
Details	<input type="text"/>		
Are you prepared to pay penalties if you transfer/repay the mortgage?	<input type="text"/>		
Are the mortgage terms portable to a new property?	<input type="text"/>		
Is the repayment vehicle on track?	<input type="text"/>		
Details of Shortfall	<input type="text"/>		
Held as Tenants in Common (%)	<input type="text"/>		
Property Ownership (%)	<input type="text"/>		

## 6 Assets & Liabilities(Continued)

### Mortgage Details 2

Borrower	<input type="text"/>		
Provider	<input type="text"/>		
Mortgage Type	<input type="text"/>	Equity	<input type="text"/>
Outstanding Mortgage	<input type="text"/>	Start Date	<input type="text"/>
Property Valuation	<input type="text"/>	End Date	<input type="text"/>
Property Price	<input type="text"/>		
Property Use	<input type="text"/>	Interest Type	<input type="text"/>
Monthly Repayment	<input type="text"/>	Interest Rate	<input type="text"/>
Repayment Method	<input type="text"/>		
Property Address	<input type="text"/>		
Mgmt. Comp. Address	<input type="text"/>		
Building Type	<input type="text"/>	Number of Reception Rooms	<input type="text"/>
Year Built	<input type="text"/>	Number of Bedrooms	<input type="text"/>
Number of Conservatories	<input type="text"/>		
Account Number	<input type="text"/>	Deal Expiry Date	<input type="text"/>
Redemption Penalties	<input type="text"/>	Expiry Date	<input type="text"/>
Details	<input type="text"/>		
Are you prepared to pay penalties if you transfer/repay the mortgage?	<input type="text"/>		
Are the mortgage terms portable to a new property?	<input type="text"/>		
Is the repayment vehicle on track?	<input type="text"/>		
Details of Shortfall	<input type="text"/>		
Held as Tenants in Common (%)	<input type="text"/>		
Property Ownership (%)	<input type="text"/>		



## 6 Assets & Liabilities(Continued)

### Mortgage Details 3

Borrower	<input type="text"/>		
Provider	<input type="text"/>		
Mortgage Type	<input type="text"/>	Equity	<input type="text"/>
Outstanding Mortgage	<input type="text"/>	Start Date	<input type="text"/>
Property Valuation	<input type="text"/>	End Date	<input type="text"/>
Property Price	<input type="text"/>		
Property Use	<input type="text"/>	Interest Type	<input type="text"/>
Monthly Repayment	<input type="text"/>	Interest Rate	<input type="text"/>
Repayment Method	<input type="text"/>		
Property Address	<input type="text"/>		
Mgmt. Comp. Address	<input type="text"/>		
Building Type	<input type="text"/>	Number of Reception Rooms	<input type="text"/>
Year Built	<input type="text"/>	Number of Bedrooms	<input type="text"/>
Number of Conservatories	<input type="text"/>		
Account Number	<input type="text"/>	Deal Expiry Date	<input type="text"/>
Redemption Penalties	<input type="text"/>	Expiry Date	<input type="text"/>
Details	<input type="text"/>		
Are you prepared to pay penalties if you transfer/repay the mortgage?	<input type="text"/>		
Are the mortgage terms portable to a new property?	<input type="text"/>		
Is the repayment vehicle on track?	<input type="text"/>		
Details of Shortfall	<input type="text"/>		
Held as Tenants in Common (%)	<input type="text"/>		
Property Ownership (%)	<input type="text"/>		

## 6 Assets & Liabilities(Continued)

### Property & Land

Property Type	<input type="text"/>	Purchase Price	<input type="text"/>
Valuation	<input type="text"/>	Purchase Date	<input type="text"/>
Valuation Date	<input type="text"/>		
Owner	<input type="text"/>		
Property Address	<input type="text"/>		
Building Type	<input type="text"/>	Number of Bedrooms	<input type="text"/>
Year Built	<input type="text"/>		
Property Type	<input type="text"/>	Purchase Price	<input type="text"/>
Valuation	<input type="text"/>	Purchase Date	<input type="text"/>
Valuation Date	<input type="text"/>		
Owner	<input type="text"/>		
Property Address	<input type="text"/>		
Building Type	<input type="text"/>	Number of Bedrooms	<input type="text"/>
Year Built	<input type="text"/>		
Property Type	<input type="text"/>	Purchase Price	<input type="text"/>
Valuation	<input type="text"/>	Purchase Date	<input type="text"/>
Valuation Date	<input type="text"/>		
Owner	<input type="text"/>		
Property Address	<input type="text"/>		
Building Type	<input type="text"/>	Number of Bedrooms	<input type="text"/>
Year Built	<input type="text"/>		

### Motor Vehicles

Make	<input type="text"/>	Value	<input type="text"/>
Model	<input type="text"/>	Use	<input type="text"/>
Owner	<input type="text"/>	Year of Manufacture	<input type="text"/>
Make	<input type="text"/>	Value	<input type="text"/>
Model	<input type="text"/>	Use	<input type="text"/>
Owner	<input type="text"/>	Year of Manufacture	<input type="text"/>

## 6 Assets & Liabilities(Continued)

### Bank Accounts

Bank Name	<input type="text"/>	Date Account Opened	<input type="text"/>
Sort Code	<input type="text"/>	Maturity Date	<input type="text"/>
Account Number	<input type="text"/>	Account Type	<input type="text"/>
Account Name	<input type="text"/>	Account Currency	<input type="text"/>
Account Owner	<input type="text"/>	Account Balance	<input type="text"/>
Bank Address	<input type="text"/>		

Main Account For Self

Main Account For Partner

Bank Name	<input type="text"/>	Date Account Opened	<input type="text"/>
Sort Code	<input type="text"/>	Maturity Date	<input type="text"/>
Account Number	<input type="text"/>	Account Type	<input type="text"/>
Account Name	<input type="text"/>	Account Currency	<input type="text"/>
Account Owner	<input type="text"/>	Account Balance	<input type="text"/>
Bank Address	<input type="text"/>		

Main Account For Self

Main Account For Partner

Bank Name	<input type="text"/>	Date Account Opened	<input type="text"/>
Sort Code	<input type="text"/>	Maturity Date	<input type="text"/>
Account Number	<input type="text"/>	Account Type	<input type="text"/>
Account Name	<input type="text"/>	Account Currency	<input type="text"/>
Account Owner	<input type="text"/>	Account Balance	<input type="text"/>
Bank Address	<input type="text"/>		

Main Account For Self

Main Account For Partner

### Other Financial Assets

Name	Owner	Value	Purchase Price	Purchase Date
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

## 6 Assets & Liabilities(Continued)

### Loans & Credit

#### Loan & Credit Details 1

Borrower	<input type="text"/>	Start Date	<input type="text"/>
Lender	<input type="text"/>	End Date	<input type="text"/>
Outstanding Balance	<input type="text"/>	Credit Limit	<input type="text"/>
Loan Type	<input type="text"/>	Is Secured Loan	<input type="text"/>
Loan APR (%)	<input type="text"/>	Will be Cleared	<input type="text"/>
Repayment	<input type="text"/>	Source of Funds to Clear	<input type="text"/>
Repayment Frequency	<input type="text"/>	Other Source of Funds	<input type="text"/>

#### Loan & Credit Details 2

Borrower	<input type="text"/>	Start Date	<input type="text"/>
Lender	<input type="text"/>	End Date	<input type="text"/>
Outstanding Balance	<input type="text"/>	Credit Limit	<input type="text"/>
Loan Type	<input type="text"/>	Is Secured Loan	<input type="text"/>
Loan APR (%)	<input type="text"/>	Will be Cleared	<input type="text"/>
Repayment	<input type="text"/>	Source of Funds to Clear	<input type="text"/>
Repayment Frequency	<input type="text"/>	Other Source of Funds	<input type="text"/>

#### Loan & Credit Details 3

Borrower	<input type="text"/>	Start Date	<input type="text"/>
Lender	<input type="text"/>	End Date	<input type="text"/>
Outstanding Balance	<input type="text"/>	Credit Limit	<input type="text"/>
Loan Type	<input type="text"/>	Is Secured Loan	<input type="text"/>
Loan APR (%)	<input type="text"/>	Will be Cleared	<input type="text"/>
Repayment	<input type="text"/>	Source of Funds to Clear	<input type="text"/>
Repayment Frequency	<input type="text"/>	Other Source of Funds	<input type="text"/>

Do you repay your credit cards fully each month	<input type="text"/>	<input type="text"/>
Do you expect to receive inheritance	<input type="text"/>	<input type="text"/>
Indicate the amount	<input type="text"/>	<input type="text"/>
Are you the beneficiary of a trust?	<input type="text"/>	<input type="text"/>
What type of trust?	<input type="text"/>	<input type="text"/>

## 6 Assets & Liabilities(Continued)

### Summary Of Assets

	Self	Partner	Joint	Total
Home	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Other Property	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Cash	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Investment Bonds	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Pension Funds	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
NISAs	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Unit / Investment Trusts OEICS	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Shares	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Business Assets	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<b>Total Assets</b>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

### Summary Of Liabilities

	Self	Partner	Joint	Total
Mortgage (main residence)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Credit Cards	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Overdraft	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Loans / HP	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Mortgage (other property)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<b>Total Liabilities</b>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

<b>Net Worth (Total Assets – Total Liabilities)</b>	<input type="text"/>
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## 7 Needs Analysis

### Life Cover Requirements

Life Cover Required	<input type="text"/>	
	<b>Self / Joint</b>	<b>Partner</b>
Review type?	<input type="text"/>	<input type="text"/>
When do you want the policy to start?	<input type="text"/>	<input type="text"/>
Required Death Benefit	<input type="text"/>	<input type="text"/>
Required Critical Illness Benefit	<input type="text"/>	<input type="text"/>
Required Benefit Frequency	<input type="text"/>	<input type="text"/>
Required Cover Basis	<input type="text"/>	
Required Term	<input type="text"/>	<input type="text"/>
Increasing Cover Required	<input type="text"/>	<input type="text"/>
Cover Purpose	<input type="text"/>	<input type="text"/>

### Income Protection Requirements

	<b>Self / Joint</b>	<b>Partner</b>
Required Monthly Benefit	<input type="text"/>	<input type="text"/>
To Age	<input type="text"/>	<input type="text"/>
Increasing Cover Required	<input type="text"/>	<input type="text"/>
How important is it for a policy to pay out to the end of the contract term	<input type="text"/>	<input type="text"/>
What is the shortest acceptable payout period you will consider (in months)	<input type="text"/>	<input type="text"/>
What are your reasons	<input type="text"/>	<input type="text"/>

### Private Medical Insurance Requirements

	<b>Self</b>	<b>Partner</b>
Level of cover required	<input type="text"/>	<input type="text"/>

## 7 Needs Analysis(Continued)

### Investment Requirements

	Self	Partner
Do you want to invest new monies or review existing investments?		
Lump sum or regular premium investment?		
Anticipated tax position when investments mature		
ISA allowance used for this year		
Amount of ISA allowance used		
Do you anticipate being a UK resident for tax at the time of maturity?		
Do you anticipate utilising your CGT allowance during the life of the investment?		
Is a joint name investment a priority irrespective of tax or other advantages?		
Is the investment to be placed in trust?		
Is the investment for a specific purpose?		
Target amount		
Date required		
Are there any outstanding loans or credit card debts?		
Can pension contributions be used to meet your investment goals?		
Source of Wealth		
Source of Funds		
Would you like to invest solely into ethical funds?		
Would you like social responsible outcomes to be taken into account when investing?		
Is it important for you to invest your funds in socially responsible areas of investment?		
Is it important that the funds you invest in consider environmental, social and corporate governance (ESG) criteria?		
Are there any areas or industries you would prefer not to invest?		
If so, please provide details		

## 7 Needs Analysis(Continued)

### Lump Sum Investments

	Self	Partner
Growth or income?	<input type="text"/>	<input type="text"/>
Total amount to be committed excluding emergency fund	<input type="text"/>	<input type="text"/>
Amount for short term investment (0 to 5 years)	<input type="text"/>	<input type="text"/>
Amount for medium term investment (5 to 10 years)	<input type="text"/>	<input type="text"/>
Amount for long term investment (10 or more years)	<input type="text"/>	<input type="text"/>
Targeted maturity value required?	<input type="text"/>	<input type="text"/>
Target Value	<input type="text"/>	<input type="text"/>
Income amount required	<input type="text"/>	<input type="text"/>
Income frequency	<input type="text"/>	<input type="text"/>
Reason for income	<input type="text"/>	<input type="text"/>
Anticipated term in years	<input type="text"/>	<input type="text"/>

### Regular Premium Investments

	Self	Partner
Anticipated contribution period	<input type="text"/>	<input type="text"/>
Monthly amount to be committed from disposable income	<input type="text"/>	<input type="text"/>
Is a targeted maturity value required?	<input type="text"/>	<input type="text"/>
Target Maturity Value	<input type="text"/>	<input type="text"/>



## 7 Needs Analysis(Continued)

### Pension Planning Requirements

	Self	Partner
Do you wish to make new contributions or review existing pension plans?		
Please identify the existing plans that will have new contributions		
Are you looking at regular premiums or single premium contributions?		
At what age would you like to retire?		
At what age do you anticipate retiring?		
What is the oldest you would wish to retire?		
Would you like to fund your retirement planning so as to attain a specified level of income?		
Annual income required		
What is the minimum annual income you think you would need in today's terms?		
What is the current annual pension you are expecting from existing arrangements?		
What is the anticipated monthly income expected from other investments for retirement?		
How much are you currently contributing to pensions per month?		
How much is your employer currently contributing to pensions for you per month?		

## 7 Needs Analysis(Continued)

### Mortgage Requirements

Mortgage Requirement	<input style="width: 100%;" type="text"/>
Mortgage Required By	<input style="width: 100%;" type="text"/>
Mortgage Type	<input style="width: 100%;" type="text"/>
Loan Purpose	<input style="width: 100%;" type="text"/>
Buy To Let Type	<input style="width: 100%;" type="text"/>
Family Occupied BTL	<input style="width: 100%;" type="text"/>
Reason For Remortgage	<input style="width: 100%;" type="text"/>
Business Requirement	<input style="width: 100%;" type="text"/>
Business Plan	<input style="width: 100%;" type="text"/>
Business Supporting Income	<input style="width: 100%;" type="text"/>
Existing Business Accounts	<input style="width: 100%;" type="text"/>
Purchase Price	<input style="width: 60%;" type="text"/>
Deposit Amount	<input style="width: 60%;" type="text"/>
Are existing debts to be added to the loan	<input style="width: 100%;" type="text"/>
Amount of Existing Debts to be added to Loan	<input style="width: 60%;" type="text"/>
Current Monthly Payment to Service Existing Debts	<input style="width: 60%;" type="text"/>
Details of existing debts to be added	<input style="width: 100%; height: 40px;" type="text"/>
Loan Amount Required	<input style="width: 60%;" type="text"/>
Current Mortgage Outstanding	<input style="width: 60%;" type="text"/>
Share of Value Amount	<input style="width: 60%;" type="text"/>
Share of Value Percentage	<input style="width: 60%;" type="text"/>
Loan To Value	<input style="width: 60%;" type="text"/>
Source of Deposit	<input style="width: 100%;" type="text"/>
Discounted Purchase Price	<input style="width: 60%;" type="text"/>
Mortgage Term	<input style="width: 20px;" type="text"/> Years <input style="width: 20px;" type="text"/> Months
Mortgage Term	<input style="width: 20px;" type="text"/> <input style="width: 40px;" type="text"/>
Self Build Approved Scheme Type	<input style="width: 100%;" type="text"/>
Deal Type Required	<input style="width: 60%;" type="text"/>
Repayment Method	<input style="width: 100%;" type="text"/>
Repayment Vehicle	<input style="width: 100%;" type="text"/>
Interest Only Amount	<input style="width: 100%;" type="text"/>
Current Lender	<input style="width: 100%;" type="text"/>
Time With Current Lender	<input style="width: 20px;" type="text"/> Years <input style="width: 20px;" type="text"/> Months

## 7 Needs Analysis(Continued)

Bridging Exit Strategy	<input style="width: 100%;" type="text"/>
Has property been previously bridged	<input style="width: 100%;" type="text"/>
Will property be occupied by client or family member	<input style="width: 100%;" type="text"/>
Is owner a limited company	<input style="width: 100%;" type="text"/>
Total Value of Additional Properties	<input style="width: 100%;" type="text"/>
Total Amount Outstanding On Additional Properties	<input style="width: 100%;" type="text"/>
Are You Raising Extra Capital	<input style="width: 100%;" type="text"/>
For What Purpose	<input style="width: 100%;" type="text"/>
Specified Term or Lifetime Mortgage	<input style="width: 100%;" type="text"/>
Valuation Type Required	<input style="width: 100%;" type="text"/>

	Self	Partner
Applicant Type	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
Nationality Type	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
Criminal Convictions	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
Continuous Employment Start Date	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
Time in Continuous Employment	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
Number of Years Accounts Available	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>

## 7 Needs Analysis(Continued)

### Mortgage Features

Is certainty of repayment required at the end of the mortgage term

Required Product Term

Custom Product Term

 To  Months

Reasons for choices of Repayment Method and Interest Type

Are Redemption Penalties / Tie-in Periods Acceptable

Give Reasons

What is expected to happen at the end of the deal period (Revert to SVR, Find another deal, etc.)

Payment Method for Associated Fees

Do you understand the cost of adding fees and other debt to the loan

How will Interest Only amount be repaid at end of term

How will the mortgage be repaid in the event of retirement, death or critical illness

Will there be other guarantors

Details

Where is the deposit coming from

Details

What level of emergency fund will remain after the deposit is paid

Where is the emergency fund coming from

Details

Are you concerned about the possibility of future rate movements

Details

Do you wish to overpay regularly?

Would you like to offset your savings against your mortgage

Do you want the ability to vary repayment amounts or take repayment holidays

## 7 Needs Analysis(Continued)

Details	
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### Property Details

Property Location	
Property Type	
Number of Floors in Block	
Property Style	
Property Tenure	
Years Left on Lease	
Construction of Walls	
Construction of Roof	
Property Use	
Is Property Ex-Local Authority	
Is Property a Bedsit	
Bedsit Number of Rooms	
Refurbishment Required	
Will this be the only property on which you have a mortgage	
Property Address	
Is the building made of non-standard materials or subject to subsidence	
Selling Agent	
Surveyor	
What floor is the flat on	
Number of Bedrooms	

## 8 Retirement Options & Pension Unlocking

### Attitudes to Investment Risk Definitions

1. What investment does the client already hold?

2. How does he/she feel about the existing plans?

3. How have they performed?

4. Does the client have any concerns about these investments?

5. How would the client feel if investments went down?

6. What are their thoughts regarding risk reward relationship?

7. How important is security of capital?

### Requirements

	Self	Partner
What pension benefits do you currently require?	<input type="text"/>	<input type="text"/>
Are you retiring now?	<input type="text"/>	<input type="text"/>
If no, what is your anticipated retirement age?	<input type="text"/>	<input type="text"/>

## 8 Retirement Options & Pension Unlocking(Continued)

If you require income, will you receive income from other sources		
If yes, please give details		
Do you have a specific target level of income? Please detail		
How important to you are lump sum death benefits in retirement?		
Do you wish to retain investment control over your fund in retirement?		
Are you eligible for Triviality?		

## Annuity Purchase

	Self	Partner
Would you prefer to fix your income at outset for future security?		
If yes, do you wish to include a spouses provision?		
What level of guarantee period should be included?		
If Other, please note the guarantee period in years		
Do you require any escalation of income?		
Do any of your existing plans include guaranteed annuity rates?		
If yes, please detail		

## Income Drawdown - PCLS

	Self	Partner
Pension Commencement Lump Sum Require?		
For what purpose?		
Do you have access to other investments that could be utilised?		
Why is a remortgage inappropriate?		
Have you considered taking out a loan instead?		
Would friends or relatives provide assistance in the short term?		

## 8 Retirement Options & Pension Unlocking(Continued)

### Income Drawdown - Income Requirement

	Self	Partner
Why is annuity purchase inappropriate at this time?		
If income is to be taken why has a specific level been chosen?		
Is your targeted level of income likely to change in the future?		
If yes, please detail		

### Income Drawdown - Investment Requirement

	Self	Partner
What degree of flexibility do you require?		
Do you have a specific investment strategy in mind?		
If a SIPP facility is required, why is this appropriate?		



**Notes**

## Client Declaration

**Please read carefully then sign and date below.**

I confirm that the information provided is correct to the best of my knowledge. I have provided this information on the understanding that it will be used to form the basis of any advice and recommendations made to me. I am under no obligation to take up any recommendations made.

I understand that the recommendations may be made which involve a regular financial commitment or the investment of capital. Accordingly, I understand that I must be sure of the ability to meet that commitment having given consideration to all other expenditure, and the provision for any emergencies, which may require access to funds.

### Data Protection Statement

I / We confirm that we understand we may be contacted by the firm from time-to-time in the future to discuss my / our mortgage arrangements. I / We confirm that we will inform the firm if we do not wish to receive such calls.

<b>Self</b>	<b>Partner</b>	<b>Adviser</b>
<b>Date</b>	<b>Date</b>	<b>Date</b>