



CU Financial Planning

Client Fact Find

Client Name(s)

Date

Designed to help us get to know you better

This fact find is designed to help gather your relevant personal and financial information, and goals. We use this information, along with our discussions, to help develop a financial strategy that is suitable for your needs.

Potential strategies and products may be discussed during the information gathering process. These should only be acted upon once formal advice, information and explanation have been provided in a suitable advice document.

We look forward to assisting you to reach your financial goals. If you have any questions about this please contact us.

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Issued by BD Financial Advisory Pty Ltd
ABN 34 621 612 548
Australian Financial Services Licence No. 502401

Why have you sought advice?

Personal information

	Client 1	Client 2
First Name		
Last name		
Salutation		
Preferred name		
Gender		
Date of birth		
Marital status		
Tax resident of Australia		
Private health		
Centrelink Reference Number and benefit (if applicable)		

Contact details

	Client 1	Client 2
Phone number 1		
Phone number 2		
Email		
Street address		
City		
State		
Postcode		
Postal address		

Dependants

Name	Date of Birth	Financially Dependant
	Age:	<input type="checkbox"/> Yes
	Age:	<input type="checkbox"/> Yes
	Age:	<input type="checkbox"/> Yes

Employment, health and retirement

	Client 1	Client 2
Name of employer		
Occupation		
Employment type		
Employment status		
Employment start date		
Available leave		
Health		
Smoker status		
Desired retirement age		
Desired retirement income		

Estate planning

	Client 1	Client 2
Will in place		
Date of will		
Power of attorney (general/enduring)		

Your assets and liabilities

This section records all your investments and other assets as well as any loans you may have. The result determines your current net wealth.

Personal assets

Asset name	Owner	Value

Liabilities

Loan name	Owner	Amount owing

Superannuation

Asset name	Owner	Account number	No. options	Value

Pension

Asset name	Owner	Account number	No. options	Value

Investments

Asset name	Owner	Account number	No. options	Value

Net assets

Asset and liabilities	Amount
Total lifestyle assets	
Total investment assets	
Total superannuation assets	
Total pension/income stream assets	
Total liabilities	
Total net worth	

Cash flow details

Income

Name	Description	Amount(\$)	Frequency	Taxable (%)	Owner

Expenses

Name	Description	Amount(\$)	Frequency	Taxable(%)	Owner

Surplus & deficit

Gross Income	\$
Tax	\$
Net income	\$
Expenses	\$
Surplus	\$

Insurances

Policy Owner	Insured	Product Name	Premium	Frequency	Premium Basis	Type	Cover Amount

Insurance needs analysis

Client 1 Life, TPD and Trauma	Client 1 Life	Client 1 TPD	Client 1 Trauma
Replacement of ongoing expenses			
Capital for ongoing expenses			
Liabilities to be covered			
Funeral/Medical costs			
Other expenses (eg education)			
Capital for adequate cover			
Superannuation			
Non-super investments			
Other provisions			
Existing cover (to be retained)			
Total proceeds available			
Shortfall of capital (Gap)			

Client 2 Life, TPD and Trauma	Client 2 Life	Client 2 TPD	Client 2 Trauma
Replacement of ongoing expenses			
Capital for ongoing expenses			
Liabilities to be covered			
Funeral/Medical costs			
Other expenses (eg education)			
Capital for adequate cover			
Superannuation			
Non-super investments			
Other provisions			
Existing cover (to be retained)			
Total proceeds available			
Shortfall of capital (Gap)			

Income Protection	Client 1	Client 2
Current Income		
Percentage of income to cover	75% or _____	75% or _____
Super contributions to be covered (%)		
Monthly Benefit		
Benefit Period		
Waiting Period		

Client waived insurance needs analysis	Client 1	Client 2
Client requested cover		
How was that amount determined?		

Further Information	Client 1	Client 2
Do you have current health issues or concerns?		
Occupational duties		
Current exclusions/loadings		
Sports, hobbies, other interests eg aviation, water diving, motorbike riding, horse riding, motor racing, rock climbing, hang gliding		
Family health history – has someone in your immediate family experienced either a heart attack, stroke, cancer or coronary bypass?		
What policy features are important to you? For example: <ul style="list-style-type: none"> - Ability to pay for insurance premium through super fund balance - Ability to delink life and TPD insurance - Ability to choose either stepped or level premiums 		
Do you foresee any changes to your personal or financial situation? Eg inheritance, new baby, home renovations, divorce etc.		
Notes/ Other relevant information		

Other Professional Advisers

Details of your Accountant, Solicitor or Mortgage Broker. Do we have your authority to contact him/her?

To be completed by your Adviser

Scope of the Advice

Objectives to be addressed

(include features and benefits of products attractive to the client)

Objectives	Timeframe	Amount

Strategies Working Paper Section

List Strategies you are considering.

If replacing products, why have you discounted the client's existing product? Tie to the client's objectives above.

List Alternatives Strategies for each strategy/product considered and reasons for discounting them.

Notes

Your acknowledgement

You understand that discussions held during this Fact Finding stage do not constitute personal advice, and agree not to implement any strategies that may have been discussed until they have been outlined in an advice document.

The information in this form accurately reflects your current financial situation. You are not aware of any further information which would be relevant or would assist us when providing advice and/or recommendations to you. We will not accept liability for recommendations based on inaccurate or incomplete information you provide.

You understand that any advice or recommendation provided by us will be based solely on the information supplied in this Fact Find and any other personal information you provide.

You are aware that our advice is limited to the goals and objectives we agreed to address in the "Scope of the Advice" section of this Fact Find.

You understand that we are not authorised to provide specific advice in relation to direct property, general insurance, taxation, family law, and drafting estate planning documents and trusts. Any advice on these matters will be provided by qualified specialist advisers as appropriate.

You are aware that a photocopy of this Fact Find is available upon request.

You are willing to accept documents being sent to your nominated email address, including the Financial Services Guide, Advice Documents and Product Disclosure Statements.
Your nominated email address is: _____

You authorise CU Financial Planning to act on instructions from your nominated email account.

You authorise CU Financial Planning to retain, store and quote your Tax File Number (TFN) information to the Australian Tax Office when necessary and to investment bodies when making investments on your behalf. You authorise the application of your TFN to all investments in your name(s).
You may choose not to quote your Tax File Number (TFN), or claim an exemption; however a higher rate of tax may then be applied to your investment returns. It is not an offence to not quote your TFN.

You have been provided with a copy of BD Financial Advisory Financial Services Guide.

Signature Client 1

Date

Signature Client 2

Date

Plan Preparation Authority

Please review this agreement carefully as it confirms the services, cost and terms as agreed between:

Client 1	Client 2
Adviser Name: Anjan Das	

Services we will provide

You have agreed to pay a professional fee for the following:

- The collection and analysis of all relevant personal and financial data
- The identification of financial goals and objectives detailed in the "Scope of the Advice" section above
- Consideration of Risk Profile and asset allocation
- Research
- Development of an appropriate strategy based on your stated circumstances, risk profile and needs
- Preparation of your Statement of Advice
- Meeting to discuss your Statement of Advice and recommendations therein

Initial Advice Fee

The initial advice fee and payment method has been agreed to as follows:

- Total Initial Advice Fee payable is \$_____ plus GST
- Payment method _____

An invoice for the fee that has been agreed will be issued upon presentation of the Statement of Advice.

Terms of the agreement and acknowledgement

Changes to your circumstances

- Please tell us if there are any changes to your circumstances as soon as practicable. Significant changes in your circumstances may affect our advice. We reserve the right to terminate this agreement and reassess the cost of providing advice. Any additional costs will be agreed upon before we proceed with preparing your revised recommendations.

If you do not implement our advice

- If you do not implement the advice in our financial plan, all initial advice fees for the research and/or preparation of my financial plan will be due and payable immediately as detailed above. If you have agreed to pay for your initial advice via an investment deduction, an invoice will be issued to you for any amount outstanding.

Your insurance

- If you cease to pay premiums on any insurance policies arranged by us within 12 months we reserve the right to recover any amount we have had to refund to the insurance company from you. In this case you will receive an invoice from us stipulating the amount due and any payment terms.

Signature Client 1	Date
Signature Client 2	Date
Anjan Das	Date

Authorisation to collect information

Please accept a copy of this document as authority as the original will stay on file with the Adviser named below.

Client Name	Date of Birth
Address	

To Whom it May Concern:

Access to information

I am writing to inform you that I authorise you to provide:

Anjan Das	
Authorised Representative of BD Financial Advisory (AFSL No. 502401)	
Adviser Number: 313 698	
Address: Suite 4B, Lvl 4, 428 George St, SYDNEY NSW 2000	
Telephone: (02) 9231 3080	Email: adas@cufinancial.com.au

with any information and documentation they require regarding the following policies:

Policy
Policy

I am aware of the provisions of the Privacy Act and release you from those provisions in respect of the above information requested.

Transfer servicing rights

I authorise the servicing rights of my financial products to be transferred to the above named Adviser.

I understand my existing Adviser will no longer:

- Be remunerated for this policy/contract(s) following this decision;
- Have access to my policy/contract(s) information; and
- Be responsible for reviewing my ongoing needs.

I understand that the appointed Adviser and their Licensee will:

- Have access to my policy/contract(s) information;
- Be responsible for providing me with ongoing advice relating to this policy/contract(s); and
- Receive any remuneration currently being paid for this policy following the transfer.

Thank you,

Signature Client	Date
Client Name	