

# MPW

## Monument Private Wealth

### Client Profile

#### Private and Confidential

Client 1 \_\_\_\_\_

Client 2 \_\_\_\_\_

Adviser \_\_\_\_\_

#### Important Notice to Clients

In order for us to provide financial planning advice to you, we need to have a reasonable basis for that advice. The information requested in this Client Profile is one of the tools we use to establish a basis for the advice we will provide. It is therefore important for you to complete this document as accurately and fully as possible. Failure to do so could result in advice being provided that is not appropriate to your individual needs, circumstances and objectives.

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Authorised Representative (ASIC No. 412614) of Eclipse Licensee P/L (AFSLNo. 517759)

## Personal information

	Client 1	Client 2
Title	<hr/>	<hr/>
Surname	<hr/>	<hr/>
Given Names	<hr/>	<hr/>
Preferred Name	<hr/>	<hr/>
Date of Birth	<hr/>	<hr/>
Sex	<input type="checkbox"/> Male <input type="checkbox"/> Female	Male                  Female
Marital Status/Relationship	<hr/>	<hr/>
Occupation	<hr/> <hr/>	<hr/> <hr/>
Employment Status		
Employer	<hr/>	<hr/>
Are you a smoker?		
Private Health Insurance		

## Your contact details

Residential Address	<hr/> <hr/>
Postal Address (if different from above)	<hr/> <hr/>
<input type="checkbox"/> Tick if same as above	<hr/> <hr/>
Home Phone	<hr/>
Home E-mail	<hr/>

	Client 1	Client 2
Mobile	<hr/>	<hr/>
Business Phone	<hr/>	<hr/>
Other Phone	<hr/>	<hr/>
Other E-mail	<hr/>	<hr/>

## Dependant family members

e.g. Parents, Children

Name	Relationship	Age	Financially Dependent?
_____	_____		
_____	_____		
_____	_____		

## Your current estate planning details

	Client 1	Client 2
Do you have a valid Will?	_____	_____
Is it current?	_____	_____
Will location	_____	_____
Do you have a Power of Attorney?	_____	_____
	Enduring	

## Financial Position

### Income

Before-tax income	Client 1	Client 2
Salary/wages/earnings	\$ _____ per annum	\$ _____ per annum
Interest/dividends	\$ _____ per annum	\$ _____ per annum
Centrelink/ Veterans' Affairs Eg. Age Pension	\$ _____ per annum	\$ _____ per annum
Rental Income	\$ _____ per annum	\$ _____ per annum
Superannuation pension	\$ _____ per annum	\$ _____ per annum
Superannuation pension	\$ _____ per annum	\$ _____ per annum
Other e.g. Family allowance, Child maintenance	\$ _____ per annum	\$ _____ per annum
Other e.g. Family allowance, Child maintenance	\$ _____ per annum	\$ _____ per annum
<b>Total (before tax)</b>	<b>\$ _____</b>	<b>\$ _____</b>

### Notes

(Salary packaging details, bonus details, business income, child maintenance)



**Non-financial assets**

For Ownership, specify the manner of ownership (solely owned, joint tenants or tenant-in-common) and the name of the owner or owners.

	Owner	Purchase Date	Amount	Details
<b>Assets</b>				
Residential Home	_____	_____	\$	_____
Household Contents	_____	_____	\$	_____
Non-income producing Real Estate (Holiday Home, Vacant Land)	_____	_____	\$	_____
Car 1	_____	_____	\$	_____
Car 2	_____	_____	\$	_____
Boat	_____	_____	\$	_____
Caravan	_____	_____	\$	_____
Other	_____	_____	\$	_____
<b>Total Assets</b>			<b>\$</b>	_____

**Notes**

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## Superannuation

Superannuation Fund	Policy Number	Current Account Balance	Owner Client 1 / Client 2
_____	_____	\$ _____	_____
_____	_____	\$ _____	_____
_____	_____	\$ _____	_____
_____	_____	\$ _____	_____
_____	_____	\$ _____	_____
_____	_____	\$ _____	_____
_____	_____	\$ _____	_____
_____	_____	\$ _____	_____
_____	_____	\$ _____	_____

Insurance (held in Super)	Client 1	Client 2
Death Cover	\$ _____	\$ _____
TPD	\$ _____	\$ _____
Income Protection/Salary Continuance/ Temporary Disability	\$ _____ benefit period _____ Waiting period _____	\$ _____ benefit period _____ Waiting period _____
In which fund(s) is this insurance cover held?	_____	_____

Contribution Details	Client 1	Client 2
Contributions (Per Annum)	<b>Concessional Contributions:</b>	<b>Concessional Contributions:</b>
Super Contribution Type	\$ _____ SGC ( ___% x \$ _____ )	\$ _____ SGC ( ___% x \$ _____ )
	\$ _____ Salary Sacrifice ( ___% )	\$ _____ Salary Sacrifice ( ___% )
	\$ _____ Self Employed ( ___% )	\$ _____ Self Employed ( ___% )
	<b>Non-Concessional Contributions:</b>	<b>Non-Concessional Contributions:</b>
	\$ _____ Personal post-tax	\$ _____ Personal post-tax
	\$ _____ Spouse	\$ _____ Spouse
To which fund (s) are these contributions made each year?	_____	_____

**PLEASE PROVIDE A COPY OF YOUR MOST RECENT STATEMENT(S).**

## Liabilities

	Loan Amount Outstanding	Lender Name	Owner (Client 1/ Client 2 / Joint)	Loan Type (P&I or I)	Interest Rate	Fixed (F) or Variable (V)	Loan Term Remaining	Repayments	Frequency (F/n or Mth)	Percentage Tax Deductible
Principal Home	\$ _____	_____	_____	_____	_____ %	_____	_____	\$ _____	_____	_____ %
Car Loan	\$ _____	_____	_____	_____	_____ %	_____	_____	\$ _____	_____	_____ %
Personal Loan	\$ _____	_____	_____	_____	_____ %	_____	_____	\$ _____	_____	_____ %
Credit Cards	\$ _____	_____	_____	_____	_____ %	_____	_____	\$ _____	_____	_____ %
Credit Cards	\$ _____	_____	_____	_____	_____ %	_____	_____	\$ _____	_____	_____ %
Credit Cards	\$ _____	_____	_____	_____	_____ %	_____	_____	\$ _____	_____	_____ %
Other	\$ _____	_____	_____	_____	_____ %	_____	_____	\$ _____	_____	_____ %
Investment Line of Credit	\$ _____	_____	_____	_____	_____ %	_____	_____	\$ _____	_____	_____ %
Investment Loan	\$ _____	_____	_____	_____	_____ %	_____	_____	\$ _____	_____	_____ %
Investment Loan	\$ _____	_____	_____	_____	_____ %	_____	_____	\$ _____	_____	_____ %
Other	\$ _____	_____	_____	_____	_____ %	_____	_____	\$ _____	_____	_____ %

**Notes**

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## Financial planning and you

Briefly outline your goals and objectives.

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

Issues of Importance:

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

### Your short term goals (within the next 2 years)

Holiday, purchase a car, purchase a house, renovations, repay mortgage, insurance, travel, start a family, change jobs

Goals	Start Date	End Date	Estimated Costs
<i>e.g. Travel around Australia</i>	<i>Sept '08</i>	<i>Feb '09</i>	<i>\$10,000</i>
_____	_____	_____	\$
_____	_____	_____	\$
_____	_____	_____	\$

### Your medium term goals (2 to 5 years away)

Purchase a house, repay mortgage, insurance, boost retirement savings, educate children, travel, replace car

Goals	Start Date	End Date	Estimated Costs
_____	_____	_____	\$
_____	_____	_____	\$
_____	_____	_____	\$
_____	_____	_____	\$

### Your long term goals (more than 5 years away)

Purchase a business, purchase a holiday home, asset protection, boost retirement savings, be debt free, financial independence, retire

Goals	Start Date	End Date	Estimated Costs
_____	_____	_____	\$
_____	_____	_____	\$
_____	_____	_____	\$
_____	_____	_____	\$

Are there any other issues that we need to take into consideration that may affect you achieving your goals?  
e.g. health, job security, aging parents

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What are your expectations of our services?

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**Your retirement**

	Client 1	Client 2
What is your planned retirement age?	_____	_____
If you are close to retirement, what is your intended retirement date?	_____	_____
What amount (in today's dollars) do you need to support your preferred retirement lifestyle?	_____	_____

**Your lifestyle in retirement**

In addition to your day to day living expenses, please outline the lifestyle activities you wish to pursue in retirement and estimate the cost in today's dollars.

Lifestyle activity	\$
<i>e.g. Travel every two years</i>	\$10,000
_____	\$
_____	\$
<b>Total</b>	<b>\$</b>

# Budget

Anticipated changes over  
the next 12 months:

	Per week	Per month	Per year	
Mortgage	\$ _____	\$ _____	\$ _____	_____
Rent/Board	\$ _____	\$ _____	\$ _____	_____
Motor Vehicle 1	\$ _____	\$ _____	\$ _____	_____
Motor Vehicle 2	\$ _____	\$ _____	\$ _____	_____
Electricity	\$ _____	\$ _____	\$ _____	_____
Gas	\$ _____	\$ _____	\$ _____	_____
Water	\$ _____	\$ _____	\$ _____	_____
Mobile Phone	\$ _____	\$ _____	\$ _____	_____
Home Phone/Internet	\$ _____	\$ _____	\$ _____	_____
Groceries	\$ _____	\$ _____	\$ _____	_____
Entertainment	\$ _____	\$ _____	\$ _____	_____
Memberships	\$ _____	\$ _____	\$ _____	_____
_____	\$ _____	\$ _____	\$ _____	_____
_____	\$ _____	\$ _____	\$ _____	_____
_____	\$ _____	\$ _____	\$ _____	_____
_____	\$ _____	\$ _____	\$ _____	_____
<b>Total</b>	\$ _____	\$ _____	\$ _____	_____

**RISK PROFILE QUESTIONNAIRE**

Question 1	Client 1	Client 2	Score	Guidance
<b>How long is the period of your investment?</b>				
a. Less than 1 year	<input type="checkbox"/>	<input type="checkbox"/>	0	<i>This question is designed to determine when you expect to need the money you are investing.</i>
b. 1 to 2 years	<input type="checkbox"/>	<input type="checkbox"/>	1	
c. 2 to 4 years	<input type="checkbox"/>	<input type="checkbox"/>	2	
d. 4 to 7 years	<input type="checkbox"/>	<input type="checkbox"/>	3	
e. 7 to 10 years	<input type="checkbox"/>	<input type="checkbox"/>	4	
f. More than 10 years	<input type="checkbox"/>	<input type="checkbox"/>	5	

Question 2	Client 1	Client 2	Score	Guidance
<b>Generally speaking, given the proposed term of your investment, how would you describe your willingness to accept financial risks (or variability in returns) in seeking higher returns?</b>				
a. Not at all	<input type="checkbox"/>	<input type="checkbox"/>	0	<i>Based on the length of time until you need your money, are you willing to accept the possibility of fluctuations in returns from time to time to achieve a higher return over the full term of your investment?</i>
b. Low	<input type="checkbox"/>	<input type="checkbox"/>	3	
c. Moderate	<input type="checkbox"/>	<input type="checkbox"/>	7	
d. High	<input type="checkbox"/>	<input type="checkbox"/>	12	
e. Very High	<input type="checkbox"/>	<input type="checkbox"/>	15	

Question 3	Client 1	Client 2	Score	Guidance
<b>How comfortable are you with long-term investments (eg shares) that may fall in value from time to time?</b>				
a. Not at all	<input type="checkbox"/>	<input type="checkbox"/>	0	<i>This question gauges your feelings about investments that may lose value from time to time.</i>
b. I am reasonably comfortable	<input type="checkbox"/>	<input type="checkbox"/>	5	
c. I am very comfortable	<input type="checkbox"/>	<input type="checkbox"/>	10	

Question 4	Client 1	Client 2	Score	Guidance
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**How reliant will you be on income from this or these investment(s) during the investment period?**

a. I will need all my income from this investment as I have no other sources of income (eg salary or other investment income)	<input type="checkbox"/>	<input type="checkbox"/>	0	<i>Over the period of the investment you have identified in question 1, to what extent will you rely on the income from this investment to live? That is, will you also have other sources of income that you can draw on?</i>
b. I will need most of my income from this investment	<input type="checkbox"/>	<input type="checkbox"/>	2	
c. I will need some income from this investment	<input type="checkbox"/>	<input type="checkbox"/>	5	
d. I may need some income from this investment but I hope to have enough to live on from other sources	<input type="checkbox"/>	<input type="checkbox"/>	7	
e. I will not need income from this investment as I will have sufficient income from other sources	<input type="checkbox"/>	<input type="checkbox"/>	10	

**SUBTOTAL (section 1)**

Question 5	Client 1	Client 2	Score	Guidance
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**Generally speaking, and considering the proposed term of your investment, which of the following statements best summarises your objective?**

a. Preservation of capital	<input type="checkbox"/>	<input type="checkbox"/>	0	<i>This question is designed to determine your preference in the balance between income and capital growth.</i>
b. Consistent income with security of capital	<input type="checkbox"/>	<input type="checkbox"/>	2	
c. Steady income and some capital growth associated with limited fluctuation in capital value	<input type="checkbox"/>	<input type="checkbox"/>	4	
d. A balance of income and capital growth with some fluctuation in capital value	<input type="checkbox"/>	<input type="checkbox"/>	6	
e. Capital growth is more important than income	<input type="checkbox"/>	<input type="checkbox"/>	8	
f. Capital growth only with the associated greater fluctuation in capital value	<input type="checkbox"/>	<input type="checkbox"/>	10	

Question 6	Client 1	Client 2	Score	Guidance
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**Investment markets can go up or down in value. At what point would you feel concerned about your investment?**

a. Any fall in value	<input type="checkbox"/>	<input type="checkbox"/>	0	<i>This question is also designed to determine your attitude to risk and how you react to fluctuations in the capital value of your investment. The fall in value can be over any time period.</i>
b. A fall of 5%	<input type="checkbox"/>	<input type="checkbox"/>	3	
c. A fall of 10%	<input type="checkbox"/>	<input type="checkbox"/>	6	
d. A fall of 20%	<input type="checkbox"/>	<input type="checkbox"/>	12	
e. A fall of more than 25%	<input type="checkbox"/>	<input type="checkbox"/>	15	

Question 7	Client 1	Client 2	Score	Guidance
<b>Assuming you were invested for the longer term and the value of your investments fell by 25% in a short period of time (eg one month), would you:</b>				
a. Move your investments to an alternative immediately?	<input type="checkbox"/>	<input type="checkbox"/>	0	<i>This question is similar to question 6, but you are asked to indicate what specific action you would take if there was a significant fall in the value of your investment over a short period of time.</i>
b. Consider moving your investments to an alternative within 3 months?	<input type="checkbox"/>	<input type="checkbox"/>	3	
c. Consider moving half your investments to an alternative within 6 months?	<input type="checkbox"/>	<input type="checkbox"/>	6	
d. Stay invested but have some concern?	<input type="checkbox"/>	<input type="checkbox"/>	10	
e. Stay invested and not be concerned?	<input type="checkbox"/>	<input type="checkbox"/>	15	

Question 8	Client 1	Client 2	Score	Guidance
<b>How important to you is it that the value of your investments grows faster than inflation?</b>				
a. Not important – I would rather protect the value of my investment	<input type="checkbox"/>	<input type="checkbox"/>	0	<i>Based on the period of your investment, to what extent do you want the growth in the value of your investment to exceed inflation.</i>
b. Slightly important – but I'm not prepared to take unnecessary risks	<input type="checkbox"/>	<input type="checkbox"/>	3	
c. Fairly important – I know that I will need to take some risks to ensure my returns exceed inflation	<input type="checkbox"/>	<input type="checkbox"/>	7	
d. Very important – my priority is for these funds to grow significantly above inflation	<input type="checkbox"/>	<input type="checkbox"/>	10	

<b>SUBTOTAL (section 2)</b>				
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Question 9	Client 1	Client 2	Score	Guidance
<b>How would you describe your understanding of the investment markets?</b>				
a. I have very little understanding or interest	<input type="checkbox"/>	<input type="checkbox"/>	0	<i>This question is designed to determine how much you know about investment markets.</i>
b. I am not very familiar with investments	<input type="checkbox"/>	<input type="checkbox"/>	2	
c. I have enough experience to understand that markets fluctuate	<input type="checkbox"/>	<input type="checkbox"/>	5	
d. I am an experienced investor in some asset classes	<input type="checkbox"/>	<input type="checkbox"/>	8	
e. I am experienced and knowledgeable about all asset classes	<input type="checkbox"/>	<input type="checkbox"/>	10	

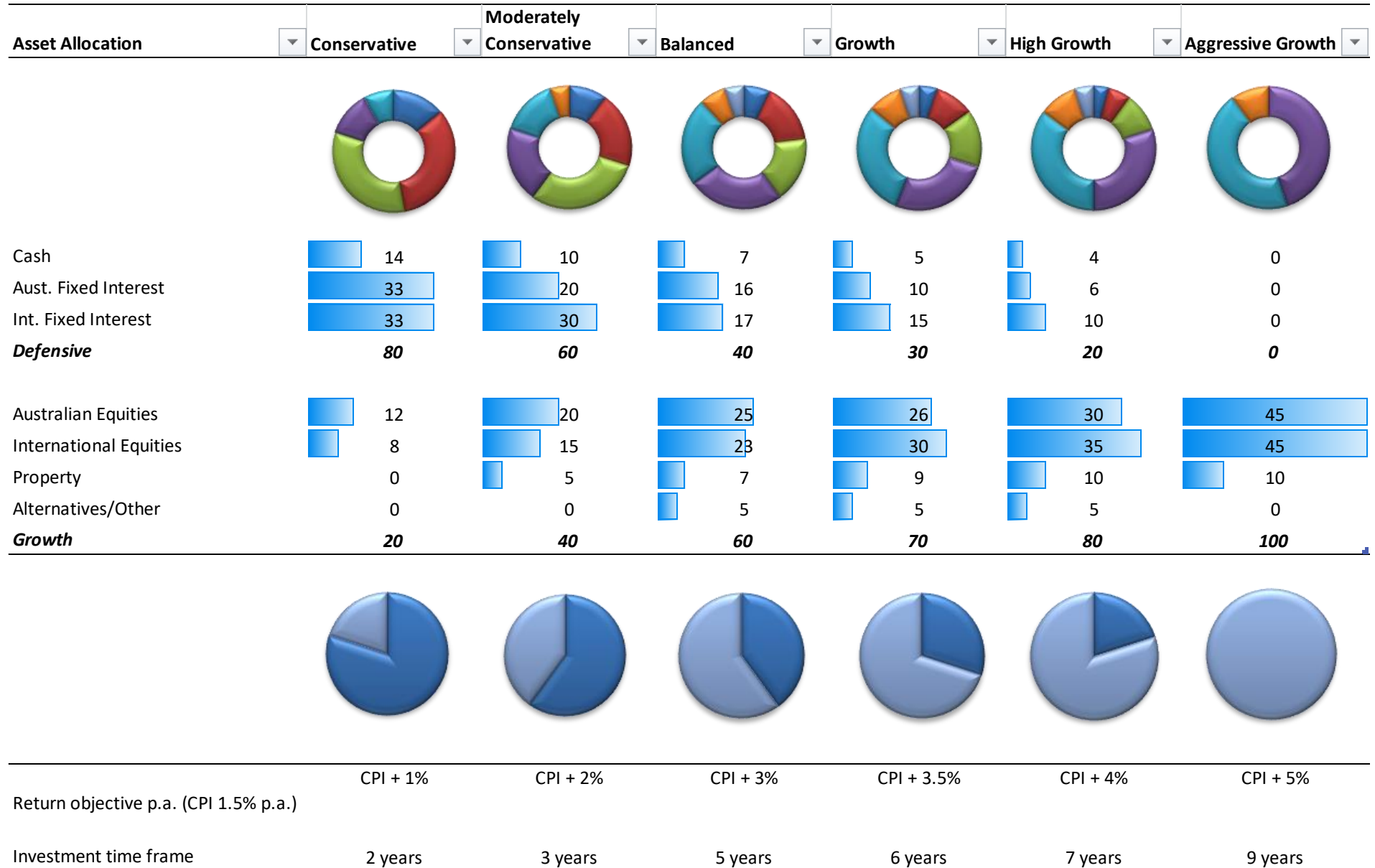
<b>SUBTOTAL (section 3)</b>				
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	Client 1	Client 2
<i>Subtotal (Page 1)</i>		
<i>Subtotal (Page 2)</i>		
<i>Subtotal (Page 3)</i>		
<b>TOTAL SCORE</b>		

Score	Risk Category	Description
≤30	<p><b>Conservative</b></p> <p>Risk</p> <div style="display: flex; flex-direction: column; align-items: center;"> <div style="background-color: red; color: white; padding: 2px 5px;">Very High</div> <div style="background-color: orange; color: white; padding: 2px 5px;">High</div> <div style="background-color: yellow; color: black; padding: 2px 5px;">Moderate</div> <div style="background-color: green; color: white; padding: 2px 5px;">Low</div> <div style="background-color: blue; color: white; padding: 2px 5px;">Very Low</div> </div>	<p>The investment objective of a “conservative” investor is to maintain the current value of their investments above all other considerations. Conservative investors seek security above all else or need most of their money within a short timeframe, and they are prepared to accept low overall returns in exchange for this security.</p> <p>A conservative portfolio looks to invest around 20% in growth assets (e.g. equities and property) and the remainder in defensive assets (e.g. cash and fixed income). The figure of 20% is a general benchmark; actual allocations over time will vary around this as investment conditions change and investment managers take opportunities to improve returns.</p> <p>Such a portfolio is suitable for investors with a short-term investment time frame, typically around 2 years. Suitable if:</p> <ul style="list-style-type: none"> <li>• You seek to protect your capital and are very concerned when this does not occur.</li> <li>• You are accepting of low returns in exchange for low volatility in your portfolio</li> </ul>
31 < 45	<p><b>Moderately Conservative</b></p> <p>Risk</p> <div style="display: flex; flex-direction: column; align-items: center;"> <div style="background-color: red; color: white; padding: 2px 5px;">Very High</div> <div style="background-color: orange; color: white; padding: 2px 5px;">High</div> <div style="background-color: yellow; color: black; padding: 2px 5px;">Moderate</div> <div style="background-color: green; color: white; padding: 2px 5px;">Low</div> <div style="background-color: blue; color: white; padding: 2px 5px;">Very Low</div> </div>	<p>The investment objective of a “moderately conservative” investor is to place an emphasis on relatively stable returns with the potential for modest long-term growth.</p> <p>A Defensive portfolio looks to invest around 40% in growth assets (e.g. equities and property) and the remainder in defensive assets (e.g. cash and fixed income). The figure of 40% is a general benchmark; actual allocations over time will vary around this as investment conditions change and investment managers take opportunities to improve returns.</p> <p>This portfolio suits investors who primarily seek income with some potential for capital growth. This portfolio also suits investors seeking a lower level of investment value volatility, and who are therefore willing to accept lower potential investment returns. Suitable if:</p> <ul style="list-style-type: none"> <li>• You seek to protect your capital and are somewhat concerned when this does not occur.</li> <li>• When you make a financial decision, you usually focus on the possible losses.</li> <li>• You would like minimal volatility in the investment return and value of your portfolio.</li> <li>• You understand that the rate of returns will reflect the defensive nature of the underlying investments.</li> </ul> <p>You may need to access cash from the portfolio in the short to medium-term.</p>
46 < 59	<p><b>Balanced</b></p> <p>Risk</p> <div style="display: flex; flex-direction: column; align-items: center;"> <div style="background-color: red; color: white; padding: 2px 5px;">Very High</div> <div style="background-color: orange; color: white; padding: 2px 5px;">High</div> <div style="background-color: yellow; color: black; padding: 2px 5px;">Moderate</div> <div style="background-color: green; color: white; padding: 2px 5px;">Low</div> <div style="background-color: blue; color: white; padding: 2px 5px;">Very Low</div> </div>	<p>The investment objective of a “balanced” investor is to obtain a balance of security, income and growth.</p> <p>A balanced portfolio looks to invest around 60% in growth assets (e.g. equities and property) and the remainder in defensive assets (e.g. cash and fixed income). The figure of 60% is a general benchmark; actual allocations over time will vary around this as investment conditions change and investment managers take opportunities to improve returns.</p> <p>This portfolio suits investors who desire a modest level of capital stability but are willing to accept moderate investment value volatility in return for potential investment performance.</p> <p>Suitable if:</p> <ul style="list-style-type: none"> <li>• You can accept the possibility of some short-term volatility in the returns and value of your portfolio.</li> <li>• Understand that the rate of returns will reflect the diversified nature of the underlying investments across both growth and defensive assets.</li> </ul> <p>You may need to access cash from the portfolio in the medium-term.</p>



60 < 74	<p><b>Growth</b></p> <p>Risk</p> 	<p>The investment objective of a “growth” investor is to place an emphasis on longer term growth using a combination of asset classes to moderate some volatility. A growth portfolio looks to invest around 70% in growth assets (e.g. equities and property) and the remainder in defensive assets (e.g. cash and fixed income). The figure of 70% is a general benchmark; actual allocations over time will vary around this as investment conditions change and investment managers take opportunities to improve returns.</p> <p>This portfolio suits investors who are willing to accept higher levels of investment value volatility in return for higher potential investment performance; however some capital stability is still desired. Suitable if:</p> <ul style="list-style-type: none"> <li>• You are accepting of moderate levels of short-term volatility in the returns and value of your portfolio.</li> <li>• You are interested in taking additional risk in the pursuit of potentially higher returns over the long-term.</li> </ul> <p>You may need to access cash from the portfolio in the long-term.</p>
75 < 85	<p><b>High Growth</b></p> <p>Risk</p> 	<p>The investment objective of a “high growth” investor is to place an emphasis on long term growth with a modest amount of income.</p> <p>A high growth portfolio looks to invest around 80% in growth assets (e.g. equities and property) and the remainder in defensive assets (e.g. cash and fixed income). The figure of 80% is a general benchmark; actual allocations over time will vary around this as investment conditions change and investment managers take opportunities to improve returns.</p> <p>This portfolio suits investors who are willing to accept high levels of investment value volatility in return for high potential investment performance. The higher exposure to growth assets means that capital stability is only a minor concern. Suitable if:</p> <ul style="list-style-type: none"> <li>• You understand that investment markets can and will fluctuate and that different market sectors offer different levels of risks, income and growth.</li> <li>• Your investment time horizon is for the long-term of seven or more years.</li> <li>• When you make a financial decision, you usually focus on the possible gains.</li> <li>• You are accepting of high levels of short-term volatility in the returns and value of your portfolio.</li> <li>• You are interested in taking additional risk in the pursuit of potentially higher returns over the long-term.</li> </ul> <p>You have little need to access cash from the portfolio.</p>
86=<	<p><b>Aggressive Growth</b></p> <p>Risk</p> 	<p>The investment objective of an “aggressive growth” investor is to focus on long term growth above all considerations. An aggressive growth portfolio looks to invest up to 100% in growth assets (e.g. equities and property).</p> <p>This portfolio suits investors who are willing to accept very high levels of investment value volatility to maximise potential investment performance. The 100% exposure to growth assets means that capital stability is not a consideration. Suitable if:</p> <ul style="list-style-type: none"> <li>• You understand the cyclical nature of investments and accept that there will be a very high level of volatility in the value and returns of your portfolio</li> <li>• You are experienced in and have a very good understanding of all major investment markets.</li> <li>• Your investment time horizon is for the long-term of nine or more years.</li> </ul> <p>You have no need to access cash from the portfolio.</p>



## Personal Protection

### Life and Total & Permanent Disability Insurance

Do you have Life and TPD cover?

	Client 1	Client 2
Insurer	_____	_____
Policy Owner	_____	_____
Policy Type	_____	_____
Policy Number	_____	_____
Date of Commencement	_____	_____
Total Premium	\$ _____ <i>per</i>	\$ _____ <i>per</i>
Sum Insured - Life	\$ _____	\$ _____
- TPD	\$ _____	\$ _____
Nominated Beneficiaries	_____	_____
Own Occupation or Any	_____	_____
Loading/Exclusions	_____	_____
Withdrawal value (if applicable)	_____	_____

### Income Protection

Do you have Income Protection?

	Client 1	Client 2
Insurer	_____	_____
Policy Owner	_____	_____
Indemnity/Agreed Value	_____	_____
Policy Number	_____	_____
Date of Commencement	_____	_____
Total Premium	\$ _____ <i>per</i>	\$ _____ <i>per</i>
Stepped/Level Premium Type	_____	_____
Monthly Benefit	\$ _____	\$ _____
Benefit Period	_____	_____
Waiting Period	_____	_____
Indexed to CPI	_____	_____
Super Guarantee Options	_____	_____
Loading/Exclusions	_____	_____

**Trauma Cover**

Do you have Trauma Cover?

	Client 1	Client 2
Insurer	_____	_____
Policy Owner	_____	_____
Policy Type	_____	_____
Policy Number	_____	_____
Date of Commencement	_____	_____
Total Premium	\$ _____ <i>per</i>	\$ _____ <i>per</i>
Sum Insured	\$ _____	\$ _____
Loading/Exclusions	_____	_____

**Business Insurance**

Do you have Business Insurance Cover?

	Client 1	Client 2
Insurer	_____	_____
Policy Owner	_____	_____
Policy Type	_____	_____
Policy Number	_____	_____
Date of Commencement	_____	_____ / _____
Total Premium	\$ _____ <i>per</i>	\$ _____ <i>per</i>
Sum Insured	\$ _____	\$ _____
Loading/Exclusions	_____	_____

**PLEASE PROVIDE A COPY OF YOUR MOST RECENT STATEMENT(S)**



## Our Acknowledgements

The information provided in this form (Client Profile & Lifestyle Questionnaire Sections A and any supplementary pages) is complete and accurate 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 Client Profile & Lifestyle Questionnaire Sections A and B 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 to a financial product that may be inappropriate for the needs identified.

At **my request** the areas that I require advice on are:

- |                                                                                 |                                              |
|---------------------------------------------------------------------------------|----------------------------------------------|
| <input type="checkbox"/> Retirement planning                                    | <input type="checkbox"/> Estate planning     |
| <input type="checkbox"/> Superannuation                                         | <input type="checkbox"/> Investment planning |
| <input type="checkbox"/> Budgeting                                              | <input type="checkbox"/> Gearing             |
| <input type="checkbox"/> Direct equities                                        | <input type="checkbox"/> Instalment warrants |
| <input type="checkbox"/> Life, trauma insurance and income protection insurance | <input type="checkbox"/> Other: _____        |

### Financial Services Guide

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

### Statement of Advice Preparation Fee

The fee for the preparation of the Statement of Advice has been set at \$\_\_\_\_\_ and I/we authorise \_\_\_\_\_ to proceed on this basis.

### Authority for current Adviser

I/We authorise \_\_\_\_\_ of **Eclipse Financial Management** to contact me or any of my/our existing advisers whose details I/we have provided regarding financial planning matters that may be relevant to my situation. A copy of the Eclipse Licensee Pty Ltd Privacy Act is available to me at any time online at [www.eclipsefm.com.au](http://www.eclipsefm.com.au) or from my adviser.

### Statement of Advice Related Documents Consent

I authorise my adviser to retain and use my Tax File Number (TFN) for the provision of financial services advice only. Where the TFN is no longer required, it will be destroyed or de-identified.

I acknowledge that my identification information may be required before any financial services or products are applied for in line with the Anti-Money Laundering and Counter Terrorism Financing Act. My information will be provided to the particular product issuer(s).

Client 1: Tax File Number: 

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Client 2: Tax File Number: 

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	Client 1	Client 2
<b>Signature</b>		
<b>Date</b>		

Adviser Name	Date	Signature

**Adviser Notes**

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