

FACT FIND

APPLICANT 1

Borrower Guarantor Mr Mrs Ms

Surname

First Name Middle Name

Home Phone (incl. area code) Work Phone

Email Address

Mobile D.O.B (dd/mm/yy)

Driver Licence Number

Marital Status No. of dependants & their D.O.B

Mother's Maiden Name Retirement Age 70 75

CURRENT RESIDENTIAL ADDRESS

Postcode

STATUS Own Mortgaged Renting Boarding Other

Moved in date Rent Paid \$ pw

PREVIOUS RESIDENTIAL ADDRESS (If less than 3 years at current)

Start Date End Date

NEAREST RELATIVE NOT LIVING WITH YOU

Name Relationship

Address & Phone Number

CURRENT EMPLOYMENT

PAYG Self-Employed Contract FT PT Casual

Occupation Employer Business Name

Employer Address

Gross Salary/Wage (pm) Start Date

Employer Contact Person Employer Phone Number

PREVIOUS EMPLOYMENT (If less than 3 years at current)

Occupation Employer Business Name

Employer Address

Start Date End Date

APPLICANT 2

Borrower Guarantor Mr Mrs Ms

Surname

First Name Middle Name

Home Phone (incl. area code) Work Phone

Email Address

Mobile D.O.B (dd/mm/yy)

Driver Licence Number

Marital Status No. of dependants & their D.O.B

Mother's Maiden Name Retirement Age 70 75

CURRENT RESIDENTIAL ADDRESS

Postcode

STATUS Own Mortgaged Renting Boarding Other

Moved in date Rent Paid \$ pw

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PREVIOUS EMPLOYMENT (If less than 3 years at current)

Occupation Employer Business Name

Employer Address

Start Date End Date

PROPERTIES

| | ADDRESS | OWNERSHIP | | RENTAL INCOME | VALUE |
|------------|---------|--------------------------------------|--------------------------------------|----------------------------|-------------------------|
| Property 1 | | <input type="checkbox"/> Applicant 1 | <input type="checkbox"/> Applicant 2 | \$ <input type="text"/> pm | \$ <input type="text"/> |
| Property 2 | | <input type="checkbox"/> Applicant 1 | <input type="checkbox"/> Applicant 2 | \$ <input type="text"/> pm | \$ <input type="text"/> |
| Property 3 | | <input type="checkbox"/> Applicant 1 | <input type="checkbox"/> Applicant 2 | \$ <input type="text"/> pm | \$ <input type="text"/> |
| Property 4 | | <input type="checkbox"/> Applicant 1 | <input type="checkbox"/> Applicant 2 | \$ <input type="text"/> pm | \$ <input type="text"/> |
| Property 5 | | <input type="checkbox"/> Applicant 1 | <input type="checkbox"/> Applicant 2 | \$ <input type="text"/> pm | \$ <input type="text"/> |
| Property 6 | | <input type="checkbox"/> Applicant 1 | <input type="checkbox"/> Applicant 2 | \$ <input type="text"/> pm | \$ <input type="text"/> |

VEHICLES & CONTENTS

| | MAKE | MODEL | YEAR | OWNERSHIP | | VALUE |
|---------------|------|-------|------|--------------------------------------|--------------------------------------|-------------------------|
| Vehicle 1 | | | | <input type="checkbox"/> Applicant 1 | <input type="checkbox"/> Applicant 2 | \$ <input type="text"/> |
| Vehicle 2 | | | | <input type="checkbox"/> Applicant 1 | <input type="checkbox"/> Applicant 2 | \$ <input type="text"/> |
| Vehicle 3 | | | | <input type="checkbox"/> Applicant 1 | <input type="checkbox"/> Applicant 2 | \$ <input type="text"/> |
| Home Contents | | | | <input type="checkbox"/> Applicant 1 | <input type="checkbox"/> Applicant 2 | \$ <input type="text"/> |
| Shares/Others | | | | <input type="checkbox"/> Applicant 1 | <input type="checkbox"/> Applicant 2 | \$ <input type="text"/> |

SAVINGS

| | ACCOUNT NUMBER | BANK | OWNERSHIP | | VALUE |
|-----------|----------------|------|--------------------------------------|--------------------------------------|-------------------------|
| Savings 1 | | | <input type="checkbox"/> Applicant 1 | <input type="checkbox"/> Applicant 2 | \$ <input type="text"/> |
| Savings 2 | | | <input type="checkbox"/> Applicant 1 | <input type="checkbox"/> Applicant 2 | \$ <input type="text"/> |
| Savings 3 | | | <input type="checkbox"/> Applicant 1 | <input type="checkbox"/> Applicant 2 | \$ <input type="text"/> |
| Super 1 | | | <input type="checkbox"/> Applicant 1 | <input type="checkbox"/> Applicant 2 | \$ <input type="text"/> |
| Super 2 | | | <input type="checkbox"/> Applicant 1 | <input type="checkbox"/> Applicant 2 | \$ <input type="text"/> |

Are you a guarantor for any other loans? Please provide details

| | | | |
|----------------------|--------------------------------------|--------------------------------------|-------------------------|
| <input type="text"/> | <input type="checkbox"/> Applicant 1 | <input type="checkbox"/> Applicant 2 | \$ <input type="text"/> |
|----------------------|--------------------------------------|--------------------------------------|-------------------------|

LIABILITIES - WHAT YOU OWE

HOME LOANS

| | LENDER | LIMIT | INT. RATE | | BALANCE | REPAYMENT | CLEARING? |
|------------|--------|-------------------------|----------------------|------------------------|-------------------------|----------------------------|--------------------------|
| Property 1 | | \$ <input type="text"/> | <input type="text"/> | % <input type="text"/> | \$ <input type="text"/> | \$ <input type="text"/> pm | <input type="checkbox"/> |
| Property 2 | | \$ <input type="text"/> | <input type="text"/> | % <input type="text"/> | \$ <input type="text"/> | \$ <input type="text"/> pm | <input type="checkbox"/> |
| Property 3 | | \$ <input type="text"/> | <input type="text"/> | % <input type="text"/> | \$ <input type="text"/> | \$ <input type="text"/> pm | <input type="checkbox"/> |
| Property 4 | | \$ <input type="text"/> | <input type="text"/> | % <input type="text"/> | \$ <input type="text"/> | \$ <input type="text"/> pm | <input type="checkbox"/> |
| Property 5 | | \$ <input type="text"/> | <input type="text"/> | % <input type="text"/> | \$ <input type="text"/> | \$ <input type="text"/> pm | <input type="checkbox"/> |
| Property 6 | | \$ <input type="text"/> | <input type="text"/> | % <input type="text"/> | \$ <input type="text"/> | \$ <input type="text"/> pm | <input type="checkbox"/> |

PERSONAL LOANS

| | LENDER | LIMIT | INT. RATE | | BALANCE | REPAYMENT | CLEARING? |
|--------|--------|-------------------------|----------------------|------------------------|-------------------------|----------------------------|--------------------------|
| Loan 1 | | \$ <input type="text"/> | <input type="text"/> | % <input type="text"/> | \$ <input type="text"/> | \$ <input type="text"/> pm | <input type="checkbox"/> |
| Loan 2 | | \$ <input type="text"/> | <input type="text"/> | % <input type="text"/> | \$ <input type="text"/> | \$ <input type="text"/> pm | <input type="checkbox"/> |
| Loan 3 | | \$ <input type="text"/> | <input type="text"/> | % <input type="text"/> | \$ <input type="text"/> | \$ <input type="text"/> pm | <input type="checkbox"/> |
| Loan 4 | | \$ <input type="text"/> | <input type="text"/> | % <input type="text"/> | \$ <input type="text"/> | \$ <input type="text"/> pm | <input type="checkbox"/> |

CREDIT / STORE CARDS

| | LENDER | LIMIT | INT. RATE | | BALANCE | REPAYMENT | CLEARING? |
|--------|--------|-------------------------|----------------------|------------------------|-------------------------|----------------------------|--------------------------|
| Bank 1 | | \$ <input type="text"/> | <input type="text"/> | % <input type="text"/> | \$ <input type="text"/> | \$ <input type="text"/> pm | <input type="checkbox"/> |
| Bank 2 | | \$ <input type="text"/> | <input type="text"/> | % <input type="text"/> | \$ <input type="text"/> | \$ <input type="text"/> pm | <input type="checkbox"/> |
| Bank 3 | | \$ <input type="text"/> | <input type="text"/> | % <input type="text"/> | \$ <input type="text"/> | \$ <input type="text"/> pm | <input type="checkbox"/> |
| Bank 4 | | \$ <input type="text"/> | <input type="text"/> | % <input type="text"/> | \$ <input type="text"/> | \$ <input type="text"/> pm | <input type="checkbox"/> |
| Bank 5 | | \$ <input type="text"/> | <input type="text"/> | % <input type="text"/> | \$ <input type="text"/> | \$ <input type="text"/> pm | <input type="checkbox"/> |

APPLICANTS & GUARANTORS

| FULL NAME | | FULL NAME | |
|-------------|----------------------|-------------|----------------------|
| Applicant 1 | <input type="text"/> | Guarantor 1 | <input type="text"/> |
| Applicant 2 | <input type="text"/> | Guarantor 2 | <input type="text"/> |
| Applicant 3 | <input type="text"/> | Guarantor 3 | <input type="text"/> |
| Applicant 4 | <input type="text"/> | Guarantor 4 | <input type="text"/> |

| LIVING EXPENSES | DESCRIPTION | AMOUNT Per Month (\$) | CONT. AFTER SETTLEMENT | COMMENTS (Where applicable) | VALIDATION OF EXPENSES For Broker completion only | Please outline other additional sources that were used |
|---|---|-----------------------|------------------------------|-----------------------------|---|--|
| Basic Housing & Property Expenses (Incl. Utilities) | Electricity, gas, water rates, council rates, strata fees, house maintenance Furniture, household appliances & goods | <input type="text"/> | <input type="checkbox"/> Yes | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| Rent / Board | Corrent Rent / Board / Payment to parents | <input type="text"/> | <input type="checkbox"/> Yes | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| Communications & Media | Telephone, Mobile/s, Internet and Cable TV/ Streaming Services | <input type="text"/> | <input type="checkbox"/> Yes | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| Food, Groceries & Pets | All food and grocery bills, incl. takeaway and restaurants All costs associated with pets (e.g. vet) | <input type="text"/> | <input type="checkbox"/> Yes | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| Recreation & Entertainment | Holidays, Newspapers, Magazines, Books, Gifts, Movie Hire, Alcohol, Tobacco, Gambling & general entertainment | <input type="text"/> | <input type="checkbox"/> Yes | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| Clothing & Personal Care | Clothing, grooming and all other personal care | <input type="text"/> | <input type="checkbox"/> Yes | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| Medical & Health | Doctor's visits, prescription medicines, chemists and all other medical costs | <input type="text"/> | <input type="checkbox"/> Yes | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| Transport | Fuel, registration, licence, maintenance and public transport | <input type="text"/> | <input type="checkbox"/> Yes | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| Education & Childcare | School fees, text book, uniforms, sports, after school activities, all childcare and travel costs | <input type="text"/> | <input type="checkbox"/> Yes | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| Insurance | House and contents insurance, health insurance, car insurance, life insurance, trauma insurance and income protection | <input type="text"/> | <input type="checkbox"/> Yes | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| Other | Any expenses that do not fit into the categories above, including additional superannuation contributions | <input type="text"/> | <input type="checkbox"/> Yes | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| New expenses after settlement not covered above | Electricity, gas, water rates council rates, strata fees, house maintenance & insurance | <input type="text"/> | <input type="checkbox"/> Yes | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| Other likely changes to expenses | Complete comments where applicable | <input type="text"/> | <input type="checkbox"/> Yes | <input type="text"/> | <input type="text"/> | <input type="text"/> |

Total Monthly Living Expenses

Protecting your lifestyle

Insurance can be an effective way of minimising the financial impact of death or disability on you, your family and your business. As part of our responsibilities under the National Consumer Credit Protection Act (NCCP) we are obliged to review your ability to service a financial product. If you do not have adequate risk protection in place:

- ↳ You may not be able to meet the repayments on your loan; or
- ↳ Your savings may not be sufficient to meet your obligations

| QUESTION | I DON'T KNOW | I'M NOT SURE | I'M CONFIDENT | I'M CERTAIN |
|---|--------------------------|--------------------------|--------------------------|--------------------------|
| 1 If through some form of illness or injury, you were unable to work for a short period of time, are you quite sure that your current lifestyle could be maintained? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2 If you or your partner died prematurely, are you certain that your family would be fully provided for financially? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3 If forced to retire early, due to injury or sickness, are you sure that any insurance lump sum received would be sufficient to support you and your family into the future? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

You are not obliged to apply for risk insurance as a condition of your loan.
I/we acknowledge that I/we have been made aware of the opportunity to review our risk insurance options.

I/We acknowledge that:

- I/We currently have Risk/Life Insurance
- Limited/Nil Advice Insurance
 - Full Life Insurance
- I/We do not have Risk/Life Insurance cover
- I/We are unsure of our Risk/Life Insurance cover

| Optional Fund | Cover |
|----------------------|----------------------|
| <input type="text"/> | <input type="text"/> |

Signed:

Signed:

Client Name:

Client Name:

Date:

Date: