FACT FIND V2 Mar 2012



Your Personal Details

			Applic	ant 1			Applicant 2					
Family Name												
Given Names												
Title												
Previous Name												
Gender	N	Iale			Female		M	lale		Fema	le	
Date of Birth												
Marital Status	Sin	ıgle	Married	D	e Facto	Other	Sin	ıgle	Married	De Fac	to	Other
Dependants	No:	Ages:					No:	Ages:	:			
Retirement Age												
Drivers Licence No			Expiry		State				Expiry		State	
	Mobile:		•		•		Mobile:					
	Work:						Work:					
Contact Details	Home:						Home:					
	Fax:						Fax:					
	Email:						Email:					
Residential												
Address												
Date Moved In												
Housing Status	Own l	Home	Renting	With	parents	Other	Own l	Home	Renting	With 1	parents	Other
Postal Address												
Previous Residential Addresse	es if <u>less than</u>	<u>1 3</u> years at c	urrent				-					
Previous Address												
Date Moved In												
	Full Name	:					Full Name:					
Nearest relative	Contact Nu	umber:					Contact Nu	umber:				
(not living with you)	Address:						Address:					
	Relationsh	ip:					Relationsh	ip:				
Mothers Maiden Name		I						I				

Your Employm	ent Details	5											
Occupation													
Employer's Name													
Employer's Address													
Contact Person													
Contact Number													
Employment Type	PAYG	Sel	elf- Other				PAYG		Self -		Other		
Employment Type	IAIG	En	nployed	(I	(Details required)		IAIO			Employed		(Details required)	
Employment Basis	Full Time	Pat	rt Time	Other			Full Time			Part Time		Other	
Employment Dasis	T un Time	1 41		(I	Details req	uired)		run rine		Fait Time		(Details required)	
Date Commenced													
Gross Income	\$		pw	pf	pm	pa	\$			pw	pf	pm	pa
Other Income	\$		Туре				\$			Туре			

Previous Employment (if less than three years)							
Occupation							
Employer's Name							
Employer's Address							
Contact Person							
Contact Number							
Employment Type	PAYG	Self - Employed	Other	PAYG	Self - Employed	Other	
Employment Basis	Full Time	Part Time	Other	Full Time	Part Time	Other	
Start Date							
Finish Date							

Your Business Details (if applicable)									
Business Name						ABN			
Business Address									
Are you a sole trader?		Yes	No	If Yes	Applic	ant 1 ar	ıd/or	Applicant 2	
Are you the director of	a company?	Yes	No	If Yes	Applic	ant 1 ar	ıd/or	Applicant 2	
Company Name						ABN	ACN		
Company Address									
Are you the Trustee of	a Trust?	Yes	No <u>If</u>	Yes	Applicant 1	and/or	Applic	ant 2 or	Company (as above)
Trust's Name									
Trust's Address									
Does the business have any borrowings?				Yes	No				
If so would you like these arrangements reviewed?				Yes	In the future	No)		

Your Require	ments										
	Pur	rchase				Refinance/Top Up					
Purchase Type:	Pu	ırchase	(land a	nd improvem	nent)	Purpose of refinance:	В	Better Rate		cture	
Pre-approval	La	und/Cor	nd/Construction			Consolidate Debt	A	ccess to eq	uity Please detai	il	
Are you purchasing your first home?			No								
Are you purchasing y	our first n	ome?	2	Yes	No	Home Improvements		ther			
Security address:						Security address:					
How many years do you intend to retain the property?					How many years do you in	tend to	retain the	property?			
Owner Occupie	Owner Occupied Vacant Land					Owner Occupied Vacant Land					
Investment Pro	perty	Expe	cted Re	nt \$	pw	Investment Property Expected Rent \$					
Purchase Price		\$				Estimated Value		\$			
Purchase Costs		\$				Current Debt		\$			
Contribution		\$				Refinance Costs		\$			
Gifts / Grants/ Other \$			Additional Funds Required	d	\$	Please	e detail				
Total Credit Require	ed	\$				Total Credit Required		\$			
Name on Contract	1 Other Detail Below		r	Name on Title	1		ther Please detail	1			
Thank on Contract		2					2				

Personal Questions: (If Yes please provide details)						
Has either applicant ever had any problems meeting any of your fixed commitments including mobile phone payments?	Yes	No				
Has either applicant ever been an officer or shareholder of any company of which a manager, receiver, and / or liquidator has been appointed?	Yes	No				
Does either applicant have any unsatisfied judgement(s) entered in any court against either applicant or any company of which either applicant are or were a Shareholder or Officer?	Yes	No				
Has any application in respect of this loan ever been submitted by either applicant or any other person to any other Credit Provider(s)?	Yes	No				

Assets			Liabi	lities		Monthly Repayment	
Savings Accounts- Financial Institutions	Current Value	Credit Lines - Financi	al Institution	Limit	Amount Owing	Repayment	To h pai out
1 2	\$		1 2	\$	\$	\$	04
1 2	\$		1 2	\$	\$	\$	
1	\$		1 2	\$	\$	\$	
Real Estate – Addresses	Current Value	Home Loans – Finance		Limit	Amount Owing	Repayment	
1 2	\$		1 2	\$	\$	\$	
1 2	\$		1 2	\$	\$	\$	
1 2	\$		1 2	\$	\$	\$	
1 2	\$		1 2	\$	\$	\$	
Motor Vehicles - Make & Year	Current Value	Leasing – Financial		Expiry Date	Amount Owing	Repayment	
1 2	\$		1 2		\$	\$	
1 2	\$		1 2		\$	\$	
1	\$		1		\$	\$	
2 Contents Insurer	S Insured Amount		2 1 2		\$	\$	
Superannuation – Fund	Current Value	Personal Loans - Finan		Expiry Date	Amount Owing	Repayment	
1 2	\$		1		\$	\$	
1	\$		1		\$	\$	
Business Value	\$		1		\$	\$	
Shares & Investments	Current Value	Credit Card - Financi		Limit	Amount Owing	Repayment	
1 2	\$	-	1 2	\$	\$	\$	
1 2	\$		1 2	\$	\$	\$	
1	\$		1 2	\$	\$	\$	
Deposit Paid	\$		1 2	\$	\$	\$	
Other Assets – Description	Current Value	Other Debts – De		Expiry Date	Amount Owing	Repayment	
1 2	\$		1 2		\$	\$	
1	\$		1		\$	\$	
2	\$		2		\$	\$	
2 Total Assets	\$		2 T 0	otal Liabilities	\$		
			-		y Repayments	\$	
Life Insurance Sum Insured 2	\$					1	
Do you expect any changes to your	net asset position in	the foreseeable future?	Yes	No	If so, please prov	ide further details	below
Notes:					•		

Your Monthly In	1001	me & Expe	enses								
			Applican	t 1					Appli	cant 2	
Net Income	\$		pw pf pa	\$		pm	\$		pw pf pa	\$	pm
Rental Income	\$		pw pf pa	\$		pm	\$		pw pf pa	\$	pm
Government Benefits	\$		pw pf pa	\$		pm	\$		pw pf pa	\$	pm
Investment Income	\$		pw pf pa	\$		pm	\$		pw pf pa	\$	pm
Other Income	\$		pw pf pa	\$		pm	\$		pw pf pa	\$	pm
Sub Total Net Income	1 .		A	\$		nm				\$	pm
						pm			Α		pm
Total Monthly Repayme	nts	¢	Notes	:			Minim	um Living Ex	rpenses	\$	pm
From Statement of Position		\$	pm				Other:			\$	pm
Total monthly expenses		\$	pm				Other:			\$	pm
From Budget Planning Exercise	e	Ψ					Other:			\$	pm
Total Expenses Exclude new commitment	B	\$	pm				Other:	nonthly exper	1989	\$	pm pm
							i otar n	ionuny exper	1303	\$	piii
Total Net Income A	\$	pm	Total Ex	^{penses} B	\$		pm	Surplus	s/Deficit (A –B)	* \$	pm
Applicants 1 & 2	Ψ	_			Ψ		_			Υ Ψ	_
Do you expect any variat	tion to) your income ii	n the forese	eable futi	ıre?	Ye				No	D 7
If so please explain in Additional information on Page 5											
Establishing Yo			d Objec						1		
Date by which credit is to be secured by: Applicant's Lender Preference											
Term of loan	У	/ears	months	R	equested fo	r rea	son of a	affordabilit	y Inter	est only Term	years
	-		<u> </u>						·		
Client's attitude toward	d inte	rest rate fluctua	ations?	С	oncerned		Slig	htly concer	ned	Not concerne	ed
Principal & Intere	est	Wants to 1	reduce debt		Interest Only Debt			Debt is tax	x deductible	Preserv	e Cash flow
Repayment Cycle		Weekly	For	tnightly	ightly Monthly 6 Mont			nthly Interest in Advance			
Variable		Requires f	-	Requires offset account Extra Repayments							
Basic Variable		-	ower interest					-	set account		
Introductory Varia			keep costs d		-			lity of varia	ble rate		
Professional Packa	ge	Requires of	discount rate		Req	uires	offset a	account			
Fixed Rate No. of y	0.0**	Requires s	stability in pa	yment	Rate 1	ock f	facility a	accepted		Rate lock facility	declined
Introductory Fixed		Wishes to keep costs down in first year and have stability in payment									
Line of Credit		Requires access to equity in property									
	Line of Credit Requires access to equity in property Land & Construction Progressive draw down										
Low Doc Loan								nt available			
						story of arrears					
Reverse Mortgage			access equit	-	& does not s	vich	to renav	z debt	1105 11	story of arrears	
Other Features		No ongoing fees		Redraw fa				repayment	nenalty	Other (Plea	e evolain)
Notes		TAO ONGOING IEES	>	Reutaw la	actifity	r	vo earry	repayment	penaity	Oulei (Flea	se explain)

Protecting your financial position		
Are you aware of any circumstances that may impact upon your ability to meet your financial commitments?	Yes	No
Do you rely upon your paid employment or self-employment to cover your mortgage and expenses?	Yes	No
Upon whose income are you/ your family dependent upon to maintain the proposed commitment and your expenses?	App 1	App 2
Do you have an emergency fund, liquid asset or insurance to assist with the repayment of the debt in the event of a loss of an income?	Yes	No
Would you be able to maintain your commitments and lifestyle if you or your partner were temporarily unable to earn an income?	Yes	No
Do you have a will?	Yes	No
Required Action:		

Professional Advisers							
	Financial Planner	Solicitor/Conveyancer	Real Estate Agent	Accountant			
Name							
Mobile:	Mobile:	Mobile:	Mobile:	Mobile:			
Work:	Work:	Work:	Work:	Work:			
Fax:	Fax:	Fax:	Fax:	Fax:			
Email:	Email	Email	Email	Email			

Declaration & Acknowledgement								
I/We declare that we have reviewed this document and confirm the information contained within is complete and accurate to the best of my/								
our knowledge. I / We understand that the factual information contained within this document is relied upon in making a preliminary								
assessment. I/We declare that we have received a copy of the Credit Guide for my/our records.								
Applicant 1 Name:	Applicant 2 Name:							
Signature:	Signature:							
Date:	Date:							
Representative Name:	Credit Representative No:							
Signature	Date:							

Additional Information: