

Mortgage Planner

Client name/s:	
Prepared by:	
Address:	
Phone:	
Appointment date:	

Pre-meeting checklist

Venue:

- ☐ Office
- ☐ Address (as above)
- ☐ Google map attached
- ☐ Phone meeting

Document checklist:

- ☐ Business card
- ☐ Disclosure statement
- ☐ Terms of engagement
- ☐ Responsible Lending Code

Post-meeting checklist

- | | |
|---|---|
| <input type="checkbox"/> Identification | <input type="checkbox"/> 3 month bank statements |
| <input type="checkbox"/> Proof of residency | <input type="checkbox"/> 6 month mortgage statements |
| <input type="checkbox"/> Credit checks | <input type="checkbox"/> Building contract |
| <input type="checkbox"/> Proof of income | <input type="checkbox"/> Gifts/statutory declaration |
| <input type="checkbox"/> Sales and purchase agreement | <input type="checkbox"/> Certificate of incorporation |
| <input type="checkbox"/> Valuation(s) | <input type="checkbox"/> Trust deed |
| <input type="checkbox"/> Proof of deposit | |

Mortgage Application Details

Finance date

Settlement date

Loan request

\$

Existing loans

\$

Security value

\$

LVR

%

Funding Requirements

Cost		Contribution	
Purchase price	\$	Proceeds from sale of property	\$
Construction cost	\$	Deposit paid	\$
Refinance amount	\$	Cash / savings	\$
Other debts refinanced	\$	Gift	\$
Total fees & charges	\$		\$
	\$		\$
	\$		\$
Total cost	\$	Total contribution	\$

Security Details

Address	Property type	Security value	Value type	New / existing
		\$		
		\$		
		\$		
		\$		
		\$		

Proposed Mortgage Details

Borrower	Value	Type	Purpose
	\$		
	\$		
	\$		
	\$		
	\$		

General Notes

Please add further notes if necessary

Personal Details

Client 1				Client 2					
Mr <input type="checkbox"/>	Mrs <input type="checkbox"/>	Miss <input type="checkbox"/>	Ms <input type="checkbox"/>	Dr <input type="checkbox"/>	Mr <input type="checkbox"/>	Mrs <input type="checkbox"/>	Miss <input type="checkbox"/>	Ms <input type="checkbox"/>	Dr <input type="checkbox"/>
First name				First name					
<input type="text"/>				<input type="text"/>					
Surname				Surname					
<input type="text"/>				<input type="text"/>					
Date of birth				Date of birth					
<input type="text"/>		Male <input type="checkbox"/>	Female <input type="checkbox"/>	<input type="text"/>		Male <input type="checkbox"/>	Female <input type="checkbox"/>		
Marital status		<input type="text"/>		Marital status		<input type="text"/>			
Resident status		<input type="text"/>		Resident status		<input type="text"/>			
Smoker		Yes <input type="checkbox"/>	No <input type="checkbox"/>	Smoker		Yes <input type="checkbox"/>	No <input type="checkbox"/>		
Dependents	Date of birth	Relation		Dependents	Date of birth	Relation			
<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"/>			

Contact Details

Client 1				Client 2			
Street				Street			
<input type="text"/>				<input type="text"/>			
Suburb				Suburb			
<input type="text"/>				<input type="text"/>			
City		Post code		City		Post code	
Time at address	<input type="text"/> years	<input type="text"/> months		Time at address	<input type="text"/> years	<input type="text"/> months	
Living status	<input type="checkbox"/> owned	<input type="checkbox"/> rented	<input type="checkbox"/> other	Living status	<input type="checkbox"/> owned	<input type="checkbox"/> rented	<input type="checkbox"/> other
If other, specify				If other, specify			
<input type="text"/>				<input type="text"/>			
Home		Work		Home		Work	
<input type="text"/>		<input type="text"/>		<input type="text"/>		<input type="text"/>	
Mobile				Mobile			
<input type="text"/>				<input type="text"/>			
Email				Email			
<input type="text"/>				<input type="text"/>			

Postal address, if different from above

Client 1				Client 2			
Street				Street			
<input type="text"/>				<input type="text"/>			
Suburb				Suburb			
<input type="text"/>				<input type="text"/>			
City		Post code		City		Post code	
<input type="text"/>		<input type="text"/>		<input type="text"/>		<input type="text"/>	

Previous address (if less than 3 years)

Client 1				Client 2			
Street				Street			
<input type="text"/>				<input type="text"/>			
Suburb				Suburb			
<input type="text"/>				<input type="text"/>			
City		Post code		City		Post code	
Time at address	<input type="text"/> years	<input type="text"/> months		Time at address	<input type="text"/> years	<input type="text"/> months	
Living status	<input type="checkbox"/> owned	<input type="checkbox"/> rented	<input type="checkbox"/> other	Living status	<input type="checkbox"/> owned	<input type="checkbox"/> rented	<input type="checkbox"/> other
If other, specify				If other, specify			
<input type="text"/>				<input type="text"/>			

Employment

Client 1		Client 2	
Occupation <input type="text"/>		Occupation <input type="text"/>	
Job title <input type="text"/>		Job title <input type="text"/>	
Employer <input type="text"/>		Employer <input type="text"/>	
Status Full time Part time Casual Self Employed Other		Status Full time Part time Casual Self Employed Other	
If other, specify: <input type="text"/>		If other, specify: <input type="text"/>	
Income \$ <input type="text"/> gross per annum		Income \$ <input type="text"/> gross per annum	
Length of employment <input type="text"/> years <input type="text"/> months		Length of employment <input type="text"/> years <input type="text"/> months	

Previous employment (if less than 3 years)

Client 1		Client 2	
Job title	Employer	Years	Months
<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"/>

Professional Advisers

Accountant		Solicitor	
Name	<input type="text"/>	Name	<input type="text"/>
Company name	<input type="text"/>	Company name	<input type="text"/>
Street address	<input type="text"/>	Street address	<input type="text"/>
Suburb	<input type="text"/>	Suburb	<input type="text"/>
City	<input type="text"/>	City	<input type="text"/>
Work phone	<input type="text"/>	Work phone	<input type="text"/>
Fax	<input type="text"/>	Fax	<input type="text"/>
Email	<input type="text"/>	Email	<input type="text"/>

Personal Guarantees (Remember responsible lending code requirements)

Please provide further information about any personal guarantees

Proposed Monthly Income and Expenditure

INCOME

		Annual Gross	Monthly Net
Salary/Wage	1	\$	\$
	2	\$	\$
Business	1	\$	\$
	2	\$	\$
Benefits	1	\$	\$
	2	\$	\$
Interest/Dividends		\$	\$
Other		\$	\$
Rental (as below)			
Scaled @		\$	\$
Boarder/Flatmate			
\$	per week @	%	\$
TOTAL INCOME		\$	\$

A

RENTAL INCOME

1. Address	Per Week
Street: _____	E P \$
Suburb: _____	
City: _____	Post Code: _____
2. Address	Per Week
Street: _____	E P \$
Suburb: _____	
City: _____	Post Code: _____
3. Address	Per Week
Street: _____	E P \$
Suburb: _____	
City: _____	Post Code: _____
4. Address	Per Week
Street: _____	E P \$
Suburb: _____	
City: _____	Post Code: _____
5. Address	Per Week
Street: _____	E P \$
Suburb: _____	
City: _____	Post Code: _____
TOTAL RENTAL INCOME PER WEEK	\$

EXPENSES

Rental Property Mortgages	Proposed Monthly	
\$ @ yrs	\$	
\$ @ yrs	\$	
\$ @ yrs	\$	
SUB TOTAL B	\$	B
Other Mortgage Payments (including revolving credit)		
\$ @ yrs	\$	
\$ @ yrs	\$	
\$ @ yrs	\$	
\$ @ yrs	\$	
Student Loans Balance	\$	
Student Loans Balance	\$	
Hire Purchase		
Lender	\$	
Lender	\$	
Other Loans		
Lender	\$	
Lender	\$	
Credit/Charge Cards Limit(s) \$	\$	Paid in full <input type="checkbox"/>
Store Cards Limit(s) \$	\$	
Child Support	\$	
Rates / Property Insurance / Body Corp	\$	
Rent to Pay (\$ per week)	\$	
Compulsory Superannuation	\$	
SUB TOTAL C	\$	C
PLUS SUB TOTAL D (B+C)	\$	D
Income Protection Ins/MPI Allowance/Cost	\$	
Life Insurance Allowance/cost	\$	
Medical Insurance	\$	
Food, Groceries and Clothing	\$	
M.V. Running costs, Registration, Insurance.	\$	
Utilities (Power/Telephone/Gas)	\$	
Education / Childcare	\$	
Required Medical Costs	\$	
Superannuation (Voluntary) Entertainment	\$	
Regular Donations	\$	
Other Please specify	\$	
Other Please specify	\$	
Other Please specify	\$	
Other Please specify	\$	
Other Please specify	\$	
SUB TOTAL E	\$	E
TOTAL MONTHLY EXPENSES (D+E)	\$	
NET MONTHLY INCOME (A)	\$	
NET MONTHLY SURPLUS	\$	

Statement of Assets and Liabilities (at date of application)

ASSETS (approximately)

Main Bank / Branch			
Money at Bank or Other	1		\$
	2		\$
	3		\$
Property			
1.			\$
2.			\$
3.			\$
4.			\$
5.			\$
Shares			\$
Vehicles		1	\$
		2	\$
		3	\$
Superannuation		1	(SV) \$
		2	(SV) \$
Life Insurance		1	\$ (SV) \$
		2	\$ (SV) \$
		3	\$ (SV) \$
Business Value (net)			\$
Boat/Caravan			\$
Other		1	\$
		2	\$
		3	\$
Furniture & Personal Effects			\$
TOTAL ASSETS			\$

LIABILITIES (approximately)

Overdraft		Limit \$	
		Bank	\$
Mortgages		1 Bank	\$
		2 Bank	\$
		3 Bank	\$
		4 Bank	\$
		5 Bank	\$
Personal Loan		1 From	\$
		2 From	\$
Hire Purchase		1 From	\$
		2 From	\$
Credit/Store/Charge Cards		Limit \$	\$
		From	Paid off in full <input type="checkbox"/>
		Limit \$	\$
		From	Paid off in full <input type="checkbox"/>
		Limit \$	\$
		From	Paid off in full <input type="checkbox"/>
Student Loans		\$	\$
Other Liabilities			\$
			\$
			\$
			\$
TOTAL LIABILITIES			\$
NET SURPLUS			\$
TOTAL (Per Total Assets)			\$

Scope of service

What does the client wish to discuss?

Mortgages

Home loan	<input type="checkbox"/>
Investment loan	<input type="checkbox"/>
Refinance	<input type="checkbox"/>
Commercial loan	<input type="checkbox"/>
Lender switch	<input type="checkbox"/>

Insurance

Implementation/advice	<input type="checkbox"/>
Referral	<input type="checkbox"/>
Not required	<input type="checkbox"/>

KiwiSaver

Implementation/advice	<input type="checkbox"/>
Referral	<input type="checkbox"/>
Not required	<input type="checkbox"/>

Fire & General

Implementation/advice	<input type="checkbox"/>
Referral	<input type="checkbox"/>
Not required	<input type="checkbox"/>

Is this advice limited?

Yes ☐ No ☐

If so, please explain how it has been limited:

Client objectives

Please list any specific client objectives for this engagement

1	
2	
3	

Estate planning

Client 1

Current Will?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Referral <input type="checkbox"/>
EPA (Personal care & welfare)	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Referral <input type="checkbox"/>
EPA (Property)?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Referral <input type="checkbox"/>

Client 2

Current Will?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Referral <input type="checkbox"/>
EPA (Personal care & welfare)	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Referral <input type="checkbox"/>
EPA (Property)?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Referral <input type="checkbox"/>

Loan features that are important

Client objectives

<input type="checkbox"/> Interest rate	<input type="checkbox"/> Length of term <input type="text"/> years
<input type="checkbox"/> Interest only repayments	<input type="checkbox"/> Flexibility
<input type="checkbox"/> Principal & interest repayments	<input type="checkbox"/> Redraw facility
<input type="checkbox"/> Fixed repayment amounts	<input type="checkbox"/> Internet banking
<input type="checkbox"/> Ability to make lump sum repayments	<input type="checkbox"/> Low deposit
<input type="checkbox"/> Fortnightly repayments	<input type="checkbox"/> Other <input type="text"/>
<input type="checkbox"/> Monthly repayments	<input type="checkbox"/> Other <input type="text"/>

Insurance information

Options

- ☐ You have no in force personal insurance policies and wish to look at your options.
- ☐ You have existing personal insurance policies and have asked me to collect the latest information from your insurer/s.
(you have completed and signed the letter of authorisation form)
- ☐ You have the following inforce personal insurance policies:

Underwriter	Policy number	Cover type	Benefit amount	Wait & benefit periods	Premium
					pm
					pm
					pm
					pm
					pm
					pm
					pm
					pm
					pm
					pm
					pm

General notes

Particularly agreed scope of service notes

Adviser remuneration

Type	Comments / details
<input type="checkbox"/> Provider commission	
<input type="checkbox"/> Referral fee	
<input type="checkbox"/> Service fee	

Client acknowledgments

Compliance or regulatory bodies may require evidence that I have explained specific requirements or obligations and provided certain information to you. Can you please acknowledge by signing below that these requirements have taken place?

Provision of information

I / We acknowledge the advantages of undertaking a full suitability (needs) analysis and the need to provide relevant personal and financial information and by not doing so I / we risk receiving advice or product recommendations that may not be appropriate to my / our needs or circumstances.

Scope of service

I / We understand the services being provided are as recorded in the scope of service section.

Privacy act

I/we acknowledge I / we have read and understood the information relating to the Privacy Act 1993 as set out in the Terms of Engagement.

Fees and adviser remuneration

I / We acknowledge I / we have had the basis of adviser remuneration explained and I/we agree to the option (s) indicated above; If Service Fee is selected we understand and agree to our obligations as outlined in the Terms of Engagement and the amount of the fee we will pay.

Adviser disclosure statement

I / We acknowledge that I / we have received the Disclosure Statement for

Client 1 name		Client 2 name	
Signature		Signature	
Date		Date	

Mortgage Authority & Declaration

I/we give the adviser express authority to act on my behalf with all lenders, product providers and associated parties in respect of obtaining a home loan eligibility and/or risk products associated with this application.

I/we understand that the adviser does not charge me for these services, unless specifically agreed in writing in advance, but receives a commission from the lender providing the loan. The adviser is not an employee, agent, partner, nor joint venture partner of, nor does the adviser act on behalf of the lender.

I/we acknowledge that personal information collected in this form and in the course of my dealings with the adviser named in this application (adviser) is collected initially for the purpose of assessing my application for mortgage finance and may be given to a number of lenders (each a lender) at the discretion of the adviser. If my application is successful, I/we accept that the information will be used by the lender for the purpose of administering the loan and by the lender and adviser for administering any ongoing commission payments to the adviser.

If the adviser has an arrangement with the lender that the lender will pay ongoing commission over the term of the loan, the lender will periodically disclose the loan balance to the adviser.

I/we accept that the adviser and lender might use my personal information for market research purposes and to notify me/us of products or services that may be of interest to me/us. I/we accept that the lender will, from time to time, make the information available to the lenders mortgage insurer (if any) any person with whom the lender proposes to enter into contractual arrangements, any security, trustee and any assignee or potential assignee of the lenders rights (the recipients).

The name and address of the adviser firm that will hold the information is:

Name		Address	
------	--	---------	--

I/we understand that I/we are not required by law to provide any personal information to the adviser but any failure to do so might prejudice any chances of obtaining finance.

I/We authorise:

- The adviser, the Lender and the Recipients to collect personal information about me from third parties including, but not restricted to, credit reporting agencies, banks and employers, and for those third parties to disclose information to the adviser, the Lender and the Recipients.
- The Lender to disclose my personal information to the adviser during the term of the loan in order to answer my queries or assist me with my financial arrangements as my circumstances change.
- The adviser, the Lender and the Recipients to disclose my personal information to credit reporting agencies and also to any third party making an authorised enquiry about me.
- The credit reporting agencies of the adviser, the Lender and the Recipients to hold my personal information on their systems and to use my personal information held on their systems to provide credit reporting services.
- The credit reporting agencies of the adviser, the Lender and the Recipients to provide my personal information to its customers using their credit reporting services.
- The adviser, the Lender and the Recipients to use the services of their credit reporting agencies in future for the purposes related to the provision of the loan and/or any other credit to me. This authorisation shall include the use of any monitoring services to receive updates about me if any of the personal information held about me changes.
- The adviser, the Lender and the Recipients to give information to credit reporting agencies about my default in any payment obligations.
- The credit reporting agencies of the adviser, the Lender and the Recipients to provide information about my default in any payment obligations to other customers of the credit reporting agencies.
- I/we understand and acknowledge that any fee charged by the adviser for services relating to this loan application has been disclosed to me/us and that it only relates to services provided by the adviser and is not in any way associated with services provided by the lender.

I/we understand that pursuant to the Privacy Act 1993 I have the right to request access to and correction of any personal information held by the adviser or by the lender.

I/we confirm that: **(Delete those not applicable)**

- ☐ The information contained in the application is true and correct;
- ☐ I am to meet legal and valuation costs;
- ☐ I am not registered for GST and will not be with respect to the security property.
- ☐ I am/will be registered for GST but the security property is not/will not be used for the purpose of a taxable activity.
- ☐ I am/will be registered for GST and the security property is/ will be used for the purposes of a taxable activity.

Insurance Requirements

I/we acknowledge that as part of the intended financing transaction I should review my personal risk insurance requirement.

I have been offered the option to review my personal risk insurance requirements by a specialist insurance adviser and have decided to: **(delete not applicable)**

- ☐ Have the review completed by an appointed insurance adviser
- ☐ Decline the option to review my personal risk insurance requirements and exempt the adviser, consultants, insurance advisers from any liability or loss caused as a result of this decline.

The signing of this application form in no way implies an application has been made to the adviser for such a review.

I understand that should my circumstances change before the loan is repaid, I am responsible for continuing to make loan repayments.

In the event of my death, I understand that it will be my estates responsibility to make the loan repayments and or to pay off any loan balance.

- ☐ I acknowledge that I have been provided with a copy of the adviser's Personal Disclosure Statement.
- ☐ I/We consent to receiving electronic communications from

Signed: _____

Signed: _____

Name: _____ Date: _____

Name: _____ Date: _____

Lender diary note

This Proposal /Purpose:

Client characteristics:

Financial Information / Servicing:

Security and Resource:

Product Recommendation:

Risks / Mitigants:

Adviser	
Signature	
Date	