



# personal snapshot

confidential pre-engagement questionnaire

## Thank you for approaching Evans Rossouw & Young about your financial planning

The first step in our process is to ensure that there is a good match between your objectives and the services that we can provide, so you can engage us with confidence.

### The purpose of our first meeting will thus be:

- To discuss your objectives and what you want out of an advisory relationship
- To tell you about our business and how we can assist you in achieving your goals
- To answer any questions you may have about us, our methods and fees and what to expect from a professional relationship with us
- To agree on the scope of our engagement, so we may commence work.

The information that you provide in the attached form will provide us with a broad overview of your needs and circumstances as well as your thoughts about various aspects of your financial life. This will allow us to prepare some discussion points for our first meeting so we can make the most of our time together. If you choose not to engage us following this process, your personal information will be safely disposed of and will not be used for any purpose whatsoever.

The questionnaire is in the form of an editable PDF document that you can complete electronically, save and email to us. You can also print it out and complete it by hand if preferred.

Please return it to us at least 2 days prior to our first meeting by emailing your financial adviser. Alternatively, fax 02 9922 5975 or post to PO Box 1890, North Sydney, NSW 2059.



date completed (dd/mm/yyyy)

## section A: personal information

| 1. personal details   | client 1 (you) | client 2 (your spouse/partner) |
|---|----------------|--------------------------------|
| title (Mr/Mrs/Ms/Miss/Dr)                                   |                |                                |
| given name/s  |                |                                |
| preferred name  |                |                                |
| surname   |                |                                |
| date of birth (dd/mm/yyyy)                                  |                |                                |
| place of birth<br>if not Australia, when did you move here? |                |                                |
| marital status  |                |                                |

  

| 2. contact details          | client 1 (you)                               | client 2 (your spouse/partner)               |
|-----------------------------|--|--|
| home address                |  |  |
| business address            |  |  |
| address for correspondence  | <div>home   business   other (specify)</div> | <div>home   business   other (specify)</div> |
| home phone (h)              |  |  |
| work phone (w)              |  |  |
| mobile (m)                  |  |  |
| fax (f)                     |  |  |
| email (e)                   |  |  |
| preferred method of contact | <div>h   w   m   f   e</div>                 | <div>h   w   m   f   e</div>                 |



| 3. dependants              |     |    |                |
|----------------------------|-----|----|----------------|
| name                       | 1   |    | 2              |
| relationship               |     |    |                |
| financially dependant?     | yes | no | support to age |
| date of birth (dd/mm/yyyy) |     |    |                |
| austudy/abstudy?           |     |    |                |
| occupation/school          |     |    |                |
| name                       | 3   |    | 4              |
| relationship               |     |    |                |
| financially dependant?     | yes | no | support to age |
| date of birth (dd/mm/yyyy) |     |    |                |
| austudy/abstudy?           |     |    |                |
| occupation/school          |     |    |                |

  

| 4. health               | client 1 (you) |                              | client 2 (your spouse/partner) |                              |
|-------------------------|----------------|------------------------------|--------------------------------|------------------------------|
| current state of health |                |                              |                                |                              |
| private health fund     | yes            | fund:                        | yes                            | fund:                        |
|                         | no             |                              | no                             |                              |
| smoker?                 | yes            | if no, when did you give up? | yes                            | if no, when did you give up? |
|                         | no             |                              | no                             |                              |

  

| 5. employment  | client 1 (you) |        |        | client 2 (your spouse/partner) |        |        |
|--|----------------|--------|--------|--------------------------------|--------|--------|
| occupation   |                |        |        |                                |        |        |
| industry   |                |        |        |                                |        |        |
| employment status<br>(eg. employee, retired,<br>self-employed, etc.)           | f/time         | p/time | hrs/wk | f/time                         | p/time | hrs/wk |
| employer name  |                |        |        |                                |        |        |
| employment start date<br>if less than one year, please<br>give a brief history |                |        |        |                                |        |        |
| main duties<br>(and % manual tasks)  |                |        |        |                                |        |        |



| 6. income  | client 1 (you) | client 2 (your spouse/partner) |
|--|----------------|--------------------------------|
| gross salary/wages <sup>2</sup> (employed)         | \$             | \$                             |
| net business income <sup>123</sup> (self employed) | \$             | \$                             |
| <b>less - salary package items:</b>                |                |                                |
| motor vehicle                                      | \$             | \$                             |
| salary sacrifice                                   | \$             | \$                             |
| super  | \$             | \$                             |
| other  | \$             | \$                             |
| other  | \$             | \$                             |
| <b>plus - other income:</b>                        |                |                                |
| fees   | \$             | \$                             |
| commissions  | \$             | \$                             |
| bonuses  | \$             | \$                             |
| annual expenses (estimate)                         | \$             | \$                             |

<sup>1</sup> Net of business expenses incurred, before income tax | <sup>2</sup> Inclusive of package items, before income tax | <sup>3</sup> Income benefits derived from the personal exertion activities of the client

| 7. personal asset details         | owner (client 1, client 2, joint, other) | market value |
|-----------------------------------|--|--------------|
| principal residence               |  | \$           |
| contents/personal effects         |  | \$           |
| motor vehicles                    |  | \$           |
| holiday home                      |  | \$           |
| recreational property (boat etc.) |  | \$           |
| other                             |  | \$           |
| other                             |  | \$           |

| 8. investments      | owner (client 1, client 2, joint, other) | market value |
|---------------------|--|--------------|
| investment property |  | \$           |
| managed funds       |  | \$           |
| shares              |  | \$           |
| term deposits       |  | \$           |
| cash                |  | \$           |
| other               |  | \$           |
| other               |  | \$           |
| other               |  | \$           |



| 9. superannuation                                      | fund 1 | fund 2 | fund 3 |
|--|--------|--------|--------|
| fund name  |        |        |        |
| owner (client 1, client 2)                             |        |        |        |
| fund type (self-managed, employer, personal, rollover) |        |        |        |
| current value  |        |        |        |
| eligible service date                                  |        |        |        |
| current contribution                                   |        |        |        |

If you do not have this information readily available, would you like us to obtain it from the relevant product provider on your behalf?

yes, please contact my product provider

no

| 10. liabilities  | loan 1 | loan 2 | loan 3 |
|--|--------|--------|--------|
| loan description (e.g. investment, car, home mortgage, credit card)  |        |        |        |
| owner (e.g. client 1, client 2)                                      |        |        |        |
| loan type (e.g. line of credit, principal & interest, interest only) |        |        |        |
| lender (e.g. ANZ, Westpac)   |        |        |        |
| amount owing (principal)   | \$     | \$     | \$     |
| <b>for fixed rate loans</b>  |        |        |        |
| portion of loan that is fixed (%)                                    | %      | %      | %      |
| fixed rate of interest   | %      | %      | %      |
| date that fixed rate ends  |        |        |        |
| <b>for variable rate loans</b>                                       |        |        |        |
| current variable interest rate                                       | %      | %      | %      |
| commencement date (if applicable)                                    |        |        |        |
| original term of loan (e.g. 25 years)                                |        |        |        |
| repayment frequency (weekly, monthly etc.)                           | \$     | \$     | \$     |



### 11. insurance policies – risk insurance (including cover in super)

|  | policy 1 | policy 2 | policy 3 | policy 4 |
|--|----------|----------|----------|----------|
| owner (client 1, client 2, joint, super fund, other)                     |          |          |          |          |
| person insured (client 1, client 2, joint)                               |          |          |          |          |
| type of cover (death, TPD, trauma, income protection, business expenses) |          |          |          |          |
| amount of cover  | \$       | \$       | \$       | \$       |
| insurance company  |          |          |          |          |
| premium frequency  |          |          |          |          |

If you do not have this information readily available, would you like us to obtain it from the relevant product provider on your behalf?

yes, please contact my product provider      no

### 12. reason for seeking advice

|  | client 1 (you)   | client 2 (your spouse/partner)   |
|--|--|--|
| what are your main reasons for seeking advice? | <ul style="list-style-type: none"> <li>retirement planning</li> <li>wealth creation</li> <li>redundancy planning</li> <li>superannuation (including self-managed super funds)</li> <li>investment advice</li> <li>debt management (including new loans, restructuring, leases, business loans)</li> <li>cash flow management</li> <li>estate planning</li> </ul> | <ul style="list-style-type: none"> <li>retirement planning</li> <li>wealth creation</li> <li>redundancy planning</li> <li>superannuation (including self-managed super funds)</li> <li>investment advice</li> <li>debt management (including new loans, restructuring, leases, business loans)</li> <li>cash flow management</li> <li>estate planning</li> </ul> |



| 13. planning objectives   | what are your major lifestyle and financial goals?                     |
|---|--|
| <p>short term goals<br/>[within 12 months]</p>  |  |
| <p>medium term goals<br/>[1-5 years]</p>  |  |
| <p>long term goals<br/>[5 years plus]<br/>(e.g. retire in 5 years with an annual income of \$50,000 net of tax)</p> |  |
| <p>what key issues would you like to discuss with your adviser?</p>   |  |
| 14. expected changes  | are you currently, or will you soon be experiencing financial changes? |
| <p>assets<br/>(e.g. inheritance, sale of assets etc.)</p>   |  |
| <p>liabilities</p>  |  |
| <p>income</p>   |  |
| <p>expenses</p>   |  |



section A: personal information

| 14. expected changes   | are you currently, or will you soon be experiencing changes? |
|--|--|
| work/career<br>(e.g. new job/career, promotion, starting new business etc.)  |  |
| personal/family<br>(e.g. getting married/divorced, new child, illness or death, financial support to a family member etc.) |  |

15. notes and other important information

**Important:** By submitting this questionnaire you confirm that the information provided is correct and complete and that it may form the basis of personal financial advice, should you choose to engage us as your advisers





Please tell us how you feel about various aspects of your financial life. This will be helpful in identifying some of the issues that need to be addressed in order to achieve a true sense of wellbeing in relation to your finances.

Indicate the extent to which you agree or disagree with each of the following statements by ticking the relevant box below:

| 1   | client 1 (you)   | strongly disagree | disagree | neutral | agree | strongly agree |
|-----|--|-------------------|----------|---------|-------|----------------|
| 1.  | I feel in control of my finances   |                   |          |         |       |                |
| 2.  | I am satisfied with my spending habits   |                   |          |         |       |                |
| 3.  | I am headed in the right direction with my financial affairs   |                   |          |         |       |                |
| 4.  | I do not have excessive debt   |                   |          |         |       |                |
| 5.  | I am making the most of my money   |                   |          |         |       |                |
| 6.  | I know my family will be well provided for if something happened to me   |                   |          |         |       |                |
| 7.  | My knowledge of investments is sufficient  |                   |          |         |       |                |
| 8.  | My investments are properly diversified, I understand investment risk  |                   |          |         |       |                |
| 9.  | I usually make sound investment choices  |                   |          |         |       |                |
| 10. | I am taking advantage of tax concessions   |                   |          |         |       |                |
| 11. | I know my strengths and weaknesses when it comes to money  |                   |          |         |       |                |
| 12. | I am spending enough time with my loved ones   |                   |          |         |       |                |
| 13. | I wish I had more time / money to pursue some of my interests or passions  |                   |          |         |       |                |
| 14. | Financial issues sometimes cause strain in my relationships  |                   |          |         |       |                |
| 15. | I am interested in investments and the economy   |                   |          |         |       |                |
| 16. | I have a hands-on approach to my finances – I like to be in control  |                   |          |         |       |                |
| 17. | I am living the life that I desire right now   |                   |          |         |       |                |
| 18. | I have clearly defined goals   |                   |          |         |       |                |
| 19. | I have a disciplined and structured approach to my financial affairs   |                   |          |         |       |                |
| 20. | I feel I can afford to spend on some of the "good things" in life, because I have plans in place to cater for the important issues |                   |          |         |       |                |

Once you have completed the questionnaire, please **save** the pdf and email it to your financial adviser.

If you are not online, please fax 02 9922 5975 or post to PO Box 1890, North Sydney, NSW 2059.

If applicable, please complete the financial wellbeing assessment for client 2 (your spouse/partner) on page 10.



Please tell us how you feel about various aspects of your financial life. This will be helpful in identifying some of the issues that need to be addressed in order to achieve a true sense of wellbeing in relation to your finances.

Indicate the extent to which you agree or disagree with each of the following statements by ticking the relevant box below:

| 2   | client 2 (your spouse/partner)   | strongly disagree | disagree | neutral | agree | strongly agree |
|-----|--|-------------------|----------|---------|-------|----------------|
| 1.  | I feel in control of my finances   |                   |          |         |       |                |
| 2.  | I am satisfied with my spending habits   |                   |          |         |       |                |
| 3.  | I am headed in the right direction with my financial affairs   |                   |          |         |       |                |
| 4.  | I do not have excessive debt   |                   |          |         |       |                |
| 5.  | I am making the most of my money   |                   |          |         |       |                |
| 6.  | I know my family will be well provided for if something happened to me   |                   |          |         |       |                |
| 7.  | My knowledge of investments is sufficient  |                   |          |         |       |                |
| 8.  | My investments are properly diversified, I understand investment risk  |                   |          |         |       |                |
| 9.  | I usually make sound investment choices  |                   |          |         |       |                |
| 10. | I am taking advantage of tax concessions   |                   |          |         |       |                |
| 11. | I know my strengths and weaknesses when it comes to money  |                   |          |         |       |                |
| 12. | I am spending enough time with my loved ones   |                   |          |         |       |                |
| 13. | I wish I had more time / money to pursue some of my interests or passions  |                   |          |         |       |                |
| 14. | Financial issues sometimes cause strain in my relationships  |                   |          |         |       |                |
| 15. | I am interested in investments and the economy   |                   |          |         |       |                |
| 16. | I have a hands-on approach to my finances – I like to be in control  |                   |          |         |       |                |
| 17. | I am living the life that I desire right now   |                   |          |         |       |                |
| 18. | I have clearly defined goals   |                   |          |         |       |                |
| 19. | I have a disciplined and structured approach to my financial affairs   |                   |          |         |       |                |
| 20. | I feel I can afford to spend on some of the "good things" in life, because I have plans in place to cater for the important issues |                   |          |         |       |                |

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