



Confidential Fact Find & Risk Identification - Page 1

PERSONAL DETAILS OF CLIENT 1

Surname _____

Mr Mrs Ms Miss Dr

First Names(s) _____

Date of Birth / /

Country of Birth _____

NZ Residency Held? Yes No

Marital Status Married De facto Single

Sex Male Female

Age of Dependents _____

Current Residential Address _____

Postal Address (if different from above) _____

Time there ____ Years ____ Months

If less than 3 years what was your previous address _____

Time there ____ Years ____ Months

Are you currently? Renting Boarding

Living in own home Other

Home Phone _____

Work Phone _____

Mobile Phone _____

Email Home _____

Work _____

PERSONAL DETAILS OF CLIENT 2

Surname _____

Mr Mrs Ms Miss Dr

First Names(s) _____

Date of Birth / /

Country of Birth _____

NZ Residency Held? Yes No

Marital Status Married De facto Single

Sex Male Female

Age of Dependents _____

Current Residential Address _____

Postal Address (if different from above) _____

Time there ____ Years ____ Months

If less than 3 years what was your previous address _____

Time there ____ Years ____ Months

Are you currently? Renting Boarding

Living in own home Other

Home Phone _____

Work Phone _____

Mobile Phone _____

Email Home _____

Work _____

EMPLOYMENT

Main Source of Income Salary/Wages Self Employed

Other

Note _____

Occupation _____ (To page 4)

Employer/Business Name _____

Type of Business _____

How Long ____ Years ____ Months

Gross Income \$ _____ (To page 4)

If less than 3 years - prior to that:

_____ Years

_____ Months

_____ Years

_____ Months

EMPLOYMENT

Main Source of Income Salary/Wages Self Employed

Other

Note _____

Occupation _____ (To page 4)

Employer/Business Name _____

Type of Business _____

How Long ____ Years ____ Months

Gross Income \$ _____ (To page 4)

If less than 3 years - prior to that:

_____ Years

_____ Months

_____ Years

_____ Months



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MONTHLY INCOME & EXPENDITURE (INCLUDE REPAYMENT INSTALMENTS OF ALL LOANS INCLUDING PROPOSED LOANS)

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	<input type="checkbox"/> Existing	<input type="checkbox"/> Proposed
1. Address _____		Per Week
	<input type="checkbox"/> <input type="checkbox"/>	\$ _____
2. Address _____		Per Week
	<input type="checkbox"/> <input type="checkbox"/>	\$ _____
3. Address _____		Per Week
	<input type="checkbox"/> <input type="checkbox"/>	\$ _____
4. Address _____		Per Week
	<input type="checkbox"/> <input type="checkbox"/>	\$ _____
5. Address _____		Per Week
	<input type="checkbox"/> <input type="checkbox"/>	\$ _____
TOTAL RENTAL INCOME PER WEEK		\$ _____

EXPENSES		PROPOSED MONTHLY
Rental Property Mortgages		<input type="checkbox"/> New <input type="checkbox"/> Existing
\$ _____ @ _____ %	yrs <input type="checkbox"/> <input type="checkbox"/>	\$ _____
\$ _____ @ _____ %	yrs <input type="checkbox"/> <input type="checkbox"/>	\$ _____
\$ _____ @ _____ %	yrs <input type="checkbox"/> <input type="checkbox"/>	\$ _____
SUB TOTAL B		\$ _____
Other Mortgage Payments (including Rev. Credit)		
\$ _____ @ _____ %	yrs <input type="checkbox"/> <input type="checkbox"/>	\$ _____
\$ _____ @ _____ %	yrs <input type="checkbox"/> <input type="checkbox"/>	\$ _____
\$ _____ @ _____ %	yrs <input type="checkbox"/> <input type="checkbox"/>	\$ _____
\$ _____ @ _____ %	yrs <input type="checkbox"/> <input type="checkbox"/>	\$ _____
Student Loans		\$ _____
Hire Purchase		\$ _____
Lender _____		\$ _____
Lender _____		\$ _____
Other Loans		\$ _____
Lender _____		\$ _____
Lender _____		\$ _____
Credit/Charge Cards Limit(s)	\$ _____	\$ _____
Store Cards Limit(s)	\$ _____	\$ _____
Child Support/Child Care		\$ _____
Rent to pay (\$ _____ per week)		\$ _____
Compulsory Superannuation		\$ _____
SUB TOTAL C		\$ _____
SUB TOTAL D (B+C)		\$ _____
PLUS		
Income Protection Ins/MPI Allowance/Cost		\$ _____
Life Insurance Allowance/Cost		\$ _____
Contents Insurance		\$ _____
Dwelling Insurance		\$ _____
Dwelling Rates (incl. water rates)		\$ _____
Medical Insurance		\$ _____
Motor Vehicle Insurance		\$ _____
Motor Vehicle Running & Reg.		\$ _____
Power/Telephone/Gas		\$ _____
Voluntary Superannuation		\$ _____
Food/Clothing/General		\$ _____
SUB TOTAL E		\$ _____
TOTAL MONTHLY EXPENSES (D+E)		\$ _____
NET MONTHLY INCOME (A)		\$ _____
NET MONTHLY SURPLUS		\$ _____

B

C

D

E



STEPHANIE MURRAY
MORTGAGES

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STATEMENT OF ASSETS AND LIABILITIES (AS AT DATE OF COMPLETION)

ASSETS (approximately)		LIABILITIES (approximately)	
Main Bank/Branch		Overdraft	Limit \$ _____ \$ _____
Money @ Bank/Other 1	\$ _____		Bank _____ \$ _____
2	\$ _____	Mortgages	1 Bank _____ \$ _____
3	\$ _____		2 Bank _____ \$ _____
Property - Show family home first			3 Bank _____ \$ _____
1.	(to page 4) \$ _____		4 Bank _____ \$ _____
2.	\$ _____		5 Bank _____ \$ _____
3.	\$ _____	Personal Loan	1 From _____ (to pg 4) \$ _____
4.	\$ _____		2 From _____ (to pg 4) \$ _____
5.	\$ _____	Hire Purchase	1 From _____ (to pg 4) \$ _____
Shares	\$ _____		2 From _____ (to pg 4) \$ _____
Vehicles 1	\$ _____	Credit/Store/Charge Cards	Limit \$ _____ (to pg 4) \$ _____
2	\$ _____		From _____ (to pg 4) (to _____
3	\$ _____		Limit \$ _____ pg 4) \$ (to _____
Superannuation 1	(SV) \$ _____		From _____ pg 4) (to pg _____
2	(SV) \$ _____		Limit \$ _____ 4) \$ (to pg _____
Life Insurance 1	\$ _____ K(SV) \$ _____		From _____ 4) (to pg 4) _____
2	\$ _____ K(SV) \$ _____	Student Loans	_____ \$ (to pg 4) _____
3	\$ _____ K(SV) \$ _____	Other Liabilities	_____ \$ _____
Business Value(net)	\$ _____		_____ \$ _____
Boat/Caravan	\$ _____		_____ \$ _____
Other 1	\$ _____		_____ \$ _____
2	\$ _____		_____ \$ _____
3	\$ _____		_____ \$ _____
Furniture & Personal Effects	\$ _____		_____ \$ _____
TOTAL ASSETS	\$ _____	TOTAL LIABILITIES	\$ _____
		NET SURPLUS	\$ _____
		TOTAL (Per Total Assets)	\$ _____

Are you guaranteeing a loan for any other persons. Yes (If yes provide details) No

DECLARATION I/We confirm that the above information is true and correct as at the date below.

All applicants to sign _____ Date / /

