Date:

Client Needs Analysis

YOUR DETAILS:

Full name (Client 1):

Full name (Client 2):

If Company and/or Trust:

Company/Trust name:

ABN/ACN:

Registered address:

Business address *(if different from above)*:

Full name/s of trustee/s:

1.

2.

3.

4.

Full names of beneficiaries:

1.

2.

3.

4.

CREDIT ASSISTANCE PROVIDER:

Name:	Company name:
Timothy Nimmo	i4finance Pty Ltd
Australian Credit Licence Number / Credit Representative Number *(if applicable)*:	Phone number:
i4finance Pty Ltd # 521392	1300 883 920
Mobile number:	Email address:
+61499262288	enquiries@i4finance.com.au

CREDIT GUIDE

This document provides you with information relating to our activities and those of our credit representatives. It contains information about various fees and charges that may be payable by you to us, as well as about certain commissions we may receive from a licensee when we are acting as a credit representative, or we pay to certain third parties. It also contains information about what you should do if you have a complaint or dispute in connection with our services as a credit representative. To learn more about the i4finance Credit Guide **CLICK HERE**

YOUR REQUIREMENTS AND OBJECTIVES:

For example: purchase home, buy land, building, investment property, refinance, renovate, relocation, debt consolidation, study, holiday, car, boat, extra cash, etc.

Are you a First Home Buyer? **Yes** ☐ **No** ☐

What are the primary reasons for seeking credit (how will the funds will be used) or the reasons for a review of an existing credit contract?

1.	$
2.	$
3.	$

Additional notes:

Amount of credit sought: $ Term of credit sought: Years

If **purchasing property,** how long are you looking to retain the property for? < 2 years ☐ 2-5 years ☐ 5-10 years ☐ 10 years plus ☐

Please provide reasons below.

If you have an existing loan and want to refinance or consolidating debts, please provide details of the debts that are being refinanced or consolidated and the resulting benefit to you.

YOUR DETAILS:

CLIENT 1:

Title: Mr Mrs Ms Miss Other

Surname:

Given names:

Previous name:

Date of birth: Sex: Male Female

Resident of (if not Australia):

Marital status: Single Married De facto Widowed Separated Divorced

Number of dependents: Ages:

Current address:

Time at current address: Years Months

Current residential status: Own home Mortgaged Renting Boarding Live with family Other

If under 2 years, please provide previous address details.

Previous address:

Postal address *(if different from current residential address)*:

Email address:

Home phone number:

Work phone number:

Mobile number:

Fax number:

Preferred daytime contact number: Home Work Mobile

Face to face identity check: Yes No

CLIENT 2:

Title: Mr Mrs Ms Miss Other

Surname:

Given names:

Previous name:

Date of birth: Sex: Male Female

Resident of (if not Australia):

Marital status: Single Married De facto Widowed Separated Divorced

Number of dependents: Ages:

Current address:

Time at current address: Years Months

Current residential status: Own home Mortgaged Renting Boarding Live with family Other

If under 2 years, please provide previous address details.

Previous address:

Postal address *(if different from current residential address)*:

Email address:

Home phone number:

Work phone number:

Mobile number:

Fax number:

Preferred daytime contact number: Home Work Mobile

Face to face identity check: Yes No

IDENTIFICATION DOCUMENTS:

CLIENT 1:

Document type:

Photo ID: Yes ☐ No ☐

Document number:

Place of issue:

Date of issue:

Expiry date:

Name on document:

Document issued by:

Original ☐ Certified ☐

CLIENT 2:

Document type:

Photo ID: Yes ☐ No ☐

Document number:

Place of issue:

Date of issue:

Expiry date:

Name on document:

Document issued by:

Original ☐ Certified ☐

NEAREST LIVING RELATIVE DETAILS:

CLIENT 1:

Title: Mr ☐ Mrs ☐ Ms ☐ Miss ☐ Other

Surname:

Given names:

Sex: Male ☐ Female ☐

Relationship to Client 1:

Current address:

Email address:

Home phone number:

Work phone number:

Mobile number:

Fax number:

Preferred daytime contact number: Home ☐ Work ☐ Mobile ☐

CLIENT 2:

Title: Mr ☐ Mrs ☐ Ms ☐ Miss ☐ Other

Surname:

Given names:

Sex: Male ☐ Female ☐

Relationship to Client 2:

Current address:

Email address:

Home phone number:

Work phone number:

Mobile number:

Fax number:

Preferred daytime contact number: Home ☐ Work ☐ Mobile ☐

YOUR EMPLOYMENT DETAILS:

CLIENT 1:

Employment status:

PAYG employee ☐ Self employed ☐ Family business ☐ Full time ☐
Part time ☐ Casual ☐ Contractor ☐ Temporary ☐
Home duties ☐ Retired ☐ Student ☐
Not employed ☐ Govt. benefit recipient ☐

Other

Occupation:

Employment sector or nature of business:

Employer/Company name and address:

Employer contact name and phone number (HR / Payroll contact):

Employer email:

Time at current employment: Years Months

Average hours per week (if casual or part time): Hours

If employed or in business for less than 2 years, please provide previous employment details.

Previous occupation and industry *(if different from current)*:

Previous employment status:

PAYG employee ☐ Self employed ☐ Family business ☐ Full time ☐
Part time ☐ Casual ☐ Contractor ☐ Temporary ☐
Home duties ☐ Retired ☐ Student ☐
Not employed ☐ Govt. benefit recipient ☐

Other

Previous employers name and address:

Time at previous employment: Years Months

CLIENT 2:

Employment status:

PAYG employee ☐ Self employed ☐ Family business ☐ Full time ☐
Part time ☐ Casual ☐ Contractor ☐ Temporary ☐
Home duties ☐ Retired ☐ Student ☐
Not employed ☐ Govt. benefit recipient ☐

Other

Occupation:

Employment sector or nature of business:

Employer/Company name and address:

Employer contact name and phone number (HR / Payroll contact):

Employer email:

Time at current employment: Years Months

Average hours per week (if casual or part time): Hours

If employed or in business for less than 2 years, please provide previous employment details.

Previous occupation and industry *(if different from current)*:

Previous employment status:

PAYG employee ☐ Self employed ☐ Family business ☐ Full time ☐
Part time ☐ Casual ☐ Contractor ☐ Temporary ☐
Home duties ☐ Retired ☐ Student ☐
Not employed ☐ Govt. benefit recipient ☐

Other

Previous employers name and address:

Time at previous employment: Years Months

YOUR FINANCIAL POSITION: *The following asset and liability information provides a snapshot of your net worth position.*

ASSET TYPE:	VALUE:
Principal home Client 1 ☐ Client 2 ☐ Both ☐ Address:______	$
Investment property Client 1 ☐ Client 2 ☐ Both ☐ Address:______	$
Investment property Client 1 ☐ Client 2 ☐ Both ☐ Address:______	$
Holiday home Client 1 ☐ Client 2 ☐ Both ☐ Address:______	$
Motor vehicle Client 1 ☐ Client 2 ☐ Both ☐ Type:______	$
Motor vehicle Client 1 ☐ Client 2 ☐ Both ☐ Type:______	$
Investments (eg. shares, managed funds, term deposits) Client 1 ☐ Client 2 ☐ Both ☐	$
Cash (including savings) Client 1 ☐ Client 2 ☐ Both ☐	$
Superannuation Client 1 ☐ Client 2 ☐ Both ☐	$
Contents (insured value) Client 1 ☐ Client 2 ☐ Both ☐	$
Other assets (eg. boats, caravans collections) Client 1 ☐ Client 2 ☐ Both ☐	$
Other– *provide details* ______ Client 1 ☐ Client 2 ☐ Both ☐	$
______ Client 1 ☐ Client 2 ☐ Both ☐	$
______ Client 1 ☐ Client 2 ☐ Both ☐	$
______ Client 1 ☐ Client 2 ☐ Both ☐	$
______ Client 1 ☐ Client 2 ☐ Both ☐	$
TOTAL ASSETS *(A)*	$

LIABILITY TYPE:	LIMIT:	MONTHLY REPAYMENT:	AMOUNT OWING:
Principal home Client 1 ☐ Client 2 ☐ Both ☐ Interest rate:______% Lender:______	$	$	$
Investment property Client 1 ☐ Client 2 ☐ Both ☐ Interest rate:______% Lender:______	$	$	$
Investment property Client 1 ☐ Client 2 ☐ Both ☐ Interest rate:______% Lender:______	$	$	$
Holiday home Client 1 ☐ Client 2 ☐ Both ☐ Interest rate:______% Lender:______	$	$	$
Motor vehicle finance Client 1 ☐ Client 2 ☐ Both ☐ Interest rate:______% Lender:______	$	$	$
Motor vehicle finance Client 1 ☐ Client 2 ☐ Both ☐ Interest rate:______% Lender:______	$	$	$
Line of credit Client 1 ☐ Client 2 ☐ Both ☐ Interest rate:______% Lender:______	$	$	$
Credit cards and retail store cards *(Total combined limits etc.)* Client 1 ☐ Client 2 ☐ Both ☐	$	$	$
Margin lending or other invest. loans Client 1 ☐ Client 2 ☐ Both ☐ Interest rate:______% Lender:______	$	$	$
Interest free debt Client 1 ☐ Client 2 ☐ Both ☐	$	$	$
Overdrafts and other bank facilities Client 1 ☐ Client 2 ☐ Both ☐	$	$	$
Loans as guarantor Client 1 ☐ Client 2 ☐ Both ☐	$	$	$
Hire purchase *(Total of all HP agreements)* Client 1 ☐ Client 2 ☐ Both ☐	$	$	$
Personal debt Client 1 ☐ Client 2 ☐ Both ☐	$	$	$
Lease *(Total of all lease agreements)* Client 1 ☐ Client 2 ☐ Both ☐	$	$	$
HECS liability / Taxation debt Client 1 ☐ Client 2 ☐ Both ☐	$	$	$
Other liabilities – *provide details* ______ Client 1 ☐ Client 2 ☐ Both ☐	$	$	$
TOTAL LIABILITIES *(B)*	$	$	$

NET WORTH *(A-B)* $

YOUR INCOME AND EXPENDITURE:

YOUR INCOME IF PAYG CLIENTS:

CLIENT 1:

ANNUAL INCOME:

	GROSS	NET
Base incomes/salary	$	$
Bonuses Period of receipt:__________	$	$
Regular overtime Period of receipt:__________	$	$
Existing rental income		$
Expected rental income		$
Investment income		$
Government allowances		$
Other __________		$
SUBTOTAL *(1)*		$

CLIENT 2:

ANNUAL INCOME:

	GROSS	NET
Base incomes/salary	$	$
Bonuses Period of receipt:__________	$	$
Regular overtime Period of receipt:__________	$	$
Existing rental income		$
Expected rental income		$
Investment income		$
Government allowances		$
Other __________		$
SUBTOTAL *(2)*		$

TOTAL CURRENT NET ANNUAL INCOME *(1+2)*	$

YOUR ANNUAL INCOME IF SELF EMPLOYED (LAST TWO FINANCIAL YEARS):

The following information is for: Client 1 ☐ Client 2 ☐ Both ☐

FINANCIAL YEAR ENDING / / :		FINANCIAL YEAR ENDING / / :	
Sales	$	Sales	$
Less cost of goods sold	$	**Less** cost of goods sold	$
Gross profit	$	Gross profit	$
Operating expenses	$	Operating expenses	$
NET PROFIT BEFORE TAX	$	**NET PROFIT BEFORE TAX**	$
ADD BACKS:		**ADD BACKS:**	
One off expenses	$	One off expenses	$
Interest	$	Interest	$
Superannuation	$	Superannuation	$
Depreciation	$	Depreciation	$
Directors salaries and fees	$	Directors salaries and fees	$
Other __________	$	Other __________	$
SUBTOTAL	$	**SUBTOTAL**	$
Less tax	$	Less tax	$
TOTAL	$	**TOTAL**	$

(Last financial year) **TOTAL NET ANNUAL INCOME**	$
Total expected rental income	$
Total net annual income (PAYG) + total net annual income (Self Employed) **TOTAL CURRENT NET ANNUAL INCOME**	$
Total net annual income ÷ 12 **TOTAL CURRENT NET MONTHLY INCOME *(A)***	$

YOUR ANNUAL INCOME IF SELF EMPLOYED (LAST TWO FINANCIAL YEARS): *Continued*

ACCOUNTANT'S DETAILS:

Accounting firm:

Contact name:

Contact phone number:

Email address:

YOUR CASH FLOW POSITION:

The following information provides a snapshot of your current cash flow position.

TOTAL CURRENT NET MONTHLY INCOME *(A)* *From page 5* $

CURRENT MONTHLY LOAN REPAYMENTS / RENT:

Rent:	$	Will this expenditure continue after settlement?	Yes* ☐	No ☐
Existing home loan:	$	Will this expenditure continue after settlement?	Yes* ☐	No ☐
Existing investment loan:	$	Will this expenditure continue after settlement?	Yes* ☐	No ☐
Credit cards / store cards *(combined monthly payment):*	$	Will this expenditure continue after settlement?	Yes* ☐	No ☐
Personal loan / car loan:	$	Will this expenditure continue after settlement?	Yes* ☐	No ☐
Other loans:	$	Will this expenditure continue after settlement?	Yes* ☐	No ☐
CURRENT MONTHLY REPAYMENTS *(B)*	$	**FUTURE MONTHLY REPAYMENTS* *(C)***	$	

** Subtotal of all current expenditure marked as continuing after settlement.*

REPAYMENT FOR THE PROPOSED LOAN *(D)* $

CURRENT MONTHLY LIVING EXPENSES:

Food / housekeeping:	$		
Insurance: *(eg. motor vehicle, home contents / building, medical, life / income protection)*	$		
Utilities: *(eg. rates, gas, electricity, telephones)*	$		
Transport: *(eg. public transport, petrol, registration, repairs)*	$		
Education: *(eg. school, college, university)*	$		
Dependants support: *(eg. childcare, child maintenance)*	$		
Entertainment:	$	**TOTAL FUTURE NET ANNUAL INCOME**	$
Other: ______________________	$	**TOTAL FUTURE NET MONTHLY INCOME# *(I)***	$
CURRENT MONTHLY LIVING EXPENSES *(E)*	$	**FUTURE MONTHLY LIVING EXPENSES# *(F)***	$
TOTAL CURRENT MONTHLY EXPENDITURE *(B+E)=G*	$	**TOTAL FUTURE MONTHLY EXPENDITURE *(C+D+F)=H***	$
TOTAL CURRENT MONTHLY NET SURPLUS *(A-G)*	$	**TOTAL FUTURE MONTHLY NET SURPLUS *(I-H)***	$

Please provide details of any expected changes between current and future living expenses.

YOUR PROPOSED LOAN REQUIREMENTS:

Borrower name/s property 1:	Address of security property 1:
Borrower name/s property 2:	Address of security property 2:
Borrower name/s property 3:	Address of security property 3:

IF YOU'RE PURCHASING:

PURCHASE AND LOAN COSTS:

Purchase price:	$
Lender application / Valuation fees:	$
Transfer stamp duty:	$
Legal and registration fees:	$
LMI: Add to loan? Yes ☐ No ☐	$
TOTAL COSTS *(A)*	$
LOAN AMOUNT REQUESTED *(B)*	$
OWN FUNDS REQUIRED *(A-B)=C*	$

AVAILABLE FUNDS:

Deposit paid:	$
Cash savings:	$
Sale proceeds:	$
Gift:	$
FHOG:	$
Other: ______	$
TOTAL OWN FUNDS *(D)*	$
OWN FUNDS REQUIRED *(A-B)=C*	$
SURPLUS/SHORTFALL *(D-C)*	$

IF YOU'RE REFINANCING OR INCREASING A LOAN:

Purpose for refinancing / top up? Better rate ☐ Consolidate debts ☐

Need extra cash ☐ Restructure ☐ Investing ☐ Renovating ☐

Building ☐ Other ______

Property value *(property being refinanced)*:	$
Total amount owed:	$

Property status: Owner occupied ☐ Investment property ☐ Vacant land ☐

Current loan balance:	$
Lender application / Valuation fees:	$
Legal fees:	$
LMI: Add to loan? Yes ☐ No ☐	$
Discharge costs:	$
Other exit fees: ______	$
SUBTOTAL REFINANCE AND LOAN COSTS *(E)*	$
ADDITIONAL LOANS FUNDS SOUGHT *(F)*	$
TOTAL LOAN AMOUNT *(E+F)*	$

ADDITIONAL DETAILS - IF YOU'RE REFINANCING / CONSOLIDATING DEBTS:

EXISTING LOANS / CREDIT CARDS / OTHER LIABILITIES:

	DEBT 1	DEBT 2	DEBT 3	DEBT 4	DEBT 5	DEBT 6	DEBT 7	DEBT 8
Lender name:								
Loan / credit card liability type:								
Estimated payout amount:	$	$	$	$	$	$	$	$
Current interest rate:	%	%	%	%	%	%	%	%
Remaining term of loan:	Y M	Y M	Y M	Y M	Y M	Y M	Y M	Y M

Other debt: As part of the proposed consolidation of debt, are credit card limits going to be reduced or cancelled? *Please provide details below.* Yes ☐ No ☐

YOUR PREFERRED LOAN OPTIONS:

YOUR PREFERRED INTEREST RATE TYPE: *(Please select one)*

- [ ] **Variable rate –** it is important to have an interest rate that fluctuates over the term of the loan in line with market interest rate changes.
- [ ] **Fixed rate –** it is important to have certainty about the interest rate and/or repayment for a fixed term.
- [ ] **Fixed & Variable** – it is important to have a combination of fixed and variable interest rates.
- [ ] **No preferred interest rate type**.

YOUR PREFERRED REPAYMENT TYPE: *(Please select one)*

- [ ] **Principal & Interest** – it is important to have repayments that include both the principal amount borrowed and the interest payable, so that the loan is repaid in full by the end of the loan's term.
- [ ] **Interest Only –** it is important to make interest only repayments for a specified term.
- [ ] **Interest Only in Advance** – it is important to have the ability to make an advanced or lump sum interest only repayment.
- [ ] **No preferred repayment type**.

YOUR PREFERRED LOAN FEATURES:

FEATURES	REQUIRED
Pay off quickly / additional payments It is important that the loan is paid off quickly and that additional payments are allowed without penalty.	Yes ☐ No ☐ Not essential ☐
Split account It is important to have more than one loan sub account/s, or a separate account for savings / investment funds, for tax, accounting or personal expense purposes.	Yes ☐ No ☐ Not essential ☐
Re-draw It is important to have access to additional repayment funds should it be required.	Yes ☐ No ☐ Not essential ☐
100% Offset It is important to have a separate savings account linked to the loan that offsets the savings balance against the loan balance.	Yes ☐ No ☐ Not essential ☐
Line of credit It is important to have a revolving facility that allows you to draw to a limit via EFTPOS, ATM, Internet or Cheque.	Yes ☐ No ☐ Not essential ☐
Top up It is important to have access to additional funds for future use subject to sufficient equity.	Yes ☐ No ☐ Not essential ☐
Product flexibility It is important to have the ability to switch between a lender's mortgage products.	Yes ☐ No ☐ Not essential ☐
Portability It is important to have the option to transfer the loan to an alternative property to save money and time.	Yes ☐ No ☐ Not essential ☐
Other features sought	Yes ☐ Not essential ☐

Additional information/comments:

FOR THE CREDIT ASSISTANCE PROVIDER:

Disclose to the client and note any significant costs and / or risks associated with the features being sought. For example, costs of refinancing, break costs, fees for credit assistance services etc.

YOUR FINANCIAL SECURITY:

Have you had any difficulties in meeting your financial commitments in the past 2 years?

CLIENT 1: Yes ☐ No ☐

If yes, provide details below.

CLIENT 2: Yes ☐ No ☐

If yes, provide details below.

Have you received advice from an accountant, solicitor or financial planner regarding your requirements or financial objectives?

CLIENT 1: Yes ☐ No ☐

If yes, provide details below.

CLIENT 2: Yes ☐ No ☐

If yes, provide details below.

PROTECTING YOUR LIFESTYLE / ASSETS:

Do you have any insurance to protect your lifestyle eg. life, total permanent disablement insurance, income protection etc?

CLIENT 1: Yes ☐ No ☐

If no, provide details below.

CLIENT 2: Yes ☐ No ☐

If no, provide details below.

How would your lifestyle needs be maintained if you and / or your partner were

(a) temporarily unable to earn an income, for example through sickness / illness?

(b) permanently unable to earn income, for example through death / permanent disability?

CLIENT 1: Provide details below.

CLIENT 2: Provide details below.

Client 1:

Would you like someone to contact you regarding life insurance? Yes ☐ No ☐

Do you have any home and contents insurance? Yes ☐ No ☐

Would you like someone to contact you regarding home and contents insurance? Yes ☐ No ☐

Client 2:

Would you like someone to contact you regarding life insurance? Yes ☐ No ☐

Do you have any home and contents insurance? Yes ☐ No ☐

Would you like someone to contact you regarding home and contents insurance? Yes ☐ No ☐

CHANGES TO YOUR CURRENT CIRCUMSTANCES:

Do you anticipate any material changes to your financial situation? For example, change in employment, income or expenditure?

CLIENT 1: Yes ☐ No ☐

If yes, what are the reasons for the changes and what is the expected impact?

Is this a permanent change? Yes ☐ No ☐

Mitigant:

Estimated start date: Estimated end date:

CLIENT 2: Yes ☐ No ☐

If yes, what are the reasons for the changes and what is the expected impact?

Is this a permanent change? Yes ☐ No ☐

Mitigant:

Estimated start date: Estimated end date:

FOR THE CREDIT ASSISTANCE PROVIDER:

The list of verification requirements is not intended to be an exhaustive list of all of the types of evidence which can be used to confirm the client's financial situation.

VERIFICATION CHECKLIST:

PAYG CLIENTS:

- [ ] Recent payroll receipts/payslips
- [ ] Recent PAYG Summary
- [ ] Recent Income Tax Return (ATO notice of Assessment)
- [ ] Bank statements to evidence:

• debt payment history	3 months ☐	6 months ☐	12 months ☐
• salary payments	3 months ☐	6 months ☐	12 months ☐
• regular savings pattern	3 months ☐	6 months ☐	12 months ☐

- [ ] Confirmation of employment with the employer (subject to the requirements of the Privacy Act 1988)
  eg. letter from employer on company letterhead detailing base gross and net income, length of service, status of employment (handwritten letters are unacceptable)
- [ ] Other *(please list)*:

SELF-EMPLOYED CLIENTS:

- [ ] Recent income tax returns
- [ ] A statement from the client's accountant
- [ ] Business Activity Statements
- [ ] Financial statements (profit & loss / balance sheet)
- [ ] Other *(please list)*:

REFINANCING CLIENTS:

REFINANCING / SWITCHING AND DEBT CONSOLIDATION:

- [ ] Copy of existing contract/statement to verify:
  - product type
  - fixed vs variable rate
  - cost saving features
  - break costs
- [ ] 6-12 months of statements to verify:
  - current interest rate and costs
  - ongoing fees
  - repayment conduct
- [ ] Payout statement in relation to exit fees and amount of debt being refinanced

SECURITY:

- [ ] Where a property is being used as security, the ownership of the property will need to be verified (for example, by a rates notice).

ADDITIONAL CLIENT NOTES:

ACKNOWLEDGEMENTS:

The information you provide assists us in our research of those loans that Do Suit your requirements, as well as ruling out others that Do Not Suit your requirements, therefore it is important that the information you supply to us is accurate and complete.

By returning this document you acknowledge that any information or recommendation we provide you regarding a lending product is based on the information you have supplied to us. You understand that information that is incorrect, missing, or omitted may cause delays in the lending process.

- [ ] I / We acknowledge that by ticking this box i4finance has full authorisation to act on behalf of me / us, known as the applicant(s) in this Needs Analysis. I / We also acknowledge that i4finance has provided a complete copy of their credit guide and privacy policy.
- [ ] I / We acknowledge that by ticking this box all credit cards and charge cards such as American Express, Dinners Club, Go Master Cards etc have been disclosed and included in this Needs Analysis.
- [ ] I / We accept that a $250 plus GST fee will be charged for loan research, assessment and approvals if I / We don't proceed with a loan through i4finance. This fee does not apply if you proceed with the loan and if the loan is not approved by lender.

Name of Client (Print)	Insert Name or Signature	Date
Name of Client (Print)	Insert Name or Signature	Date