

# bridgewood private wealth

## CLIENT INFORMATION REVIEW

PRIVATE & CONFIDENTIAL

### PREPARED FOR:

Clients Name/s: \_\_\_\_\_

Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

### PREPARED BY:

Advisers Name: \_\_\_\_\_

Representative of Bridgewood Private Wealth Pty Ltd AFSL 389100

bridgewood  
private wealth

**Bridgewood Private Wealth Pty Ltd**

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## IMPORTANT INFORMATION

The Corporations Act 2001 requires that an adviser making financial recommendations must have reasonable grounds for making those recommendations. This means that an adviser must conduct an appropriate investigation as to the financial objectives, situation and particular needs of the client. The information requested in this form will allow the adviser to provide recommendations to the client and will be used solely for that purpose. We accept no liability for any advice given on the basis of inaccurate or incomplete information.

<b>FSG Version</b>	
<b>Date Issued to Customer</b>	
<b>Adviser Profile Version</b>	

## YOUR GOALS & OBJECTIVES

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<b>What are the reasons for you seeking financial planning advice?</b>

<b>What are your longer term objectives?</b>

## PERSONAL DETAILS

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	CLIENT 1	CLIENT 2
<b>TITLE:</b>		
<b>SURNAME:</b>		
<b>GIVEN NAMES:</b>		
<b>PREFERRED NAME:</b>		
<b>DATE OF BIRTH:</b>		
<b>PLACE OF BIRTH:</b>		
<b>MARITAL STATUS:</b>		
<b>AT WHAT AGE WOULD YOU LIKE TO RETIRE?</b>		
<b>TFN</b>		

## CONTACT DETAILS

	DETAILS	
HOME ADDRESS:		
POSTAL ADDRESS: (if not same as home)		
HOME PHONE No.:		
	CLIENT 1	CLIENT 2
WORK PHONE No.:		
FACSIMILE No.:		
MOBILE No.:		
EMAIL TO BE USED FOR CORRESPONDENCE:		
PREFERRED FORM OF CORRESPONDENCE:		

## OTHER PROFESSIONAL ADVISERS CONTACT DETAILS

### ACCOUNTANT

NAME:			
ADDRESS:			
TELEPHONE:		EMAIL:	

### SOLICITOR

NAME:			
ADDRESS:			
TELEPHONE:		EMAIL:	

## EMPLOYMENT DETAILS

Details of Employment, if any, have not previously been disclosed.

	CLIENT 1	CLIENT 2
OCCUPATION:		
INDUSTRY:		
EMPLOYMENT STATUS:	<input type="checkbox"/> F/T <input type="checkbox"/> P/T <input type="checkbox"/> Casual	<input type="checkbox"/> F/T <input type="checkbox"/> P/T <input type="checkbox"/> Casual
EMPLOYER NAME:		
EMPLOYER SGC:		
SALARY SACRIFICE AVAILABLE:	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
FUTURE EMPLOYMENT CHANGES?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Maybe	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Maybe

## CHILDREN & DEPENDENTS

Details of dependents, if any, have not previously been disclosed.

NAME	D.O.B	FINANCIALLY DEPENDENT	DEPENDANT UNTIL AGE	FUTURE NEEDS
		<input type="checkbox"/> Yes <input type="checkbox"/> No		
		<input type="checkbox"/> Yes <input type="checkbox"/> No		
		<input type="checkbox"/> Yes <input type="checkbox"/> No		
		<input type="checkbox"/> Yes <input type="checkbox"/> No		

## HEALTH DETAILS

Details regarding Health that have not previously been disclosed.

	CLIENT 1	CLIENT 2
<b>SMOKER:</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>PRIVATE HEALTH INSURANCE:</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>GENERAL STATE OF HEALTH:</b>	<input type="checkbox"/> Excellent <input type="checkbox"/> Good <input type="checkbox"/> Average <input type="checkbox"/> Poor	<input type="checkbox"/> Excellent <input type="checkbox"/> Good <input type="checkbox"/> Average <input type="checkbox"/> Poor
<b>RELEVANT DETAILS:</b>		

## HOBBIES & INTERESTS

Details of Hobbies and Interests that have not previously been disclosed.

	CLIENT 1	CLIENT 2
<b>PERSONAL SPORTING PURSUITS (e.g. GYM / CYCLING / AMATEUR SPORTS TEAM?)</b>		
<b>PROFESSIONAL SPORT (e.g. AFL FOOTBALL / GOLF / TENNIS ?)</b>		
<b>FAVOURITE / REGULAR HOLIDAY DESTINATION?</b>		
<b>FAVOURITE / REGULAR CHARITY RECIPIENT?</b>		
<b>INTERESTS (e.g. MUSIC / BOOKS / ART)</b>		

## ESTATE PLANNING

Details of Estate Planning, if any, have not previously been disclosed.

	CLIENT 1	CLIENT 2
DO YOU HAVE WILL?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
POWER OF ATTORNEY? If yes, please note who holds POA	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
ENDURING POWER OF ATTORNEY? If yes, please note who holds EPOA	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
MEDICAL POWER OF ATTORNEY/ENDURING GUARDIANSHIP?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
DO YOU HAVE A FUNERAL PLAN?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
DETAILS		

## CORPORATE ENTITIES

Do you operate a Company, Trust or Partnership?

## SUPERANNUATION FUNDS DETAILS

Details of Superannuation if any have not previously been disclosed.

OWNER	FUND	MEMBER NUMBER	ESTIMATED BALANCE	INSURANCE COVER		
				DEATH	TPD	IP

## INCOME & EXPENSES

It is important that we understand what level of savings (or debt) you have. Whilst we do not necessarily need a full breakdown, it does assist us if you can articulate any surpluses or deficit in your current budget.

### INCOME

ITEM	CLIENT 1	CLIENT 2	TOTAL AMOUNT
Gross Salary / Wages			\$
Salary Sacrifice <small>Super Motor Vehicle / Other</small>			\$
Superannuation Pension			\$
Annuity Income			\$
Investment Income <small>Interest / Dividends Rent / Other</small>			\$
Centrelink Payments <small>Age Pension, Disability, Family Allowance etc.</small>			\$
Dept. Veteran Affairs Payments			\$
Other Income			\$
Other Income			\$
<b>Total Gross Income</b>			<b>\$</b>

### ESTIMATED INCOME TAX

<b>Total Estimated Income Tax</b>	
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### EXPENSES

ITEM	OWNER	AMOUNT
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
<b>Total Expenses</b>		<b>\$</b>

### SURPLUS/SHORTFALL FUNDS – ANNUAL

<b>SURPLUS / DEFICIT (Total Gross Income - Estimated Tax - Expenses)</b>	<b>\$</b>
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## PERSONAL ASSETS

Details of Personal Assets have not previously been disclosed.

ASSETS	OWNER	ASSET VALUE \$
Cash:		\$
Principal Residence:		\$
Holiday Home:		\$
Investment Property:		\$
Shares:		\$
Motor Vehicle(s):		\$
Boat / Caravan:		\$
Personal Property / Contents:		\$
Collectables:		\$
		\$
		\$
		\$
		\$
		\$
<b>Total Personal Assets</b>		<b>\$</b>

## LIABILITIES

Details of Liabilities have not previously been disclosed.

LIABILITY:	OWNER:	ORIGINAL AMOUNT \$	INTEREST RATE %	LOAN TERM	REPAYMENTS \$	SECURITY FOR LOAN?	AMOUNT OWING \$
Principal Residence Mortgage							\$
Holiday Home Mortgage							\$
Motor Vehicle loans							\$
Credit Cards							\$
Investment Loan							\$
Margin Loan							\$
Investment Property Loan							\$
							\$
							\$
							\$
							\$
							\$
							\$
<b>Total Liabilities</b>							<b>\$</b>

## CURRENT LIFE INSURANCE DETAILS

Type: D = Death TPD = Total & Perm. Disablement T= Trauma IP = Income Protection BE = Business Expenses

	POLICY 1	POLICY 2	POLICY 3
<b>TYPE</b>			
<b>POLICY OWNER</b> (If Insurance is maintained through superannuation, please note the Fund name)			
<b>LIFE INSURED</b>			
<b>SUM INSURED</b> (Benefit Amount)			
<b>INSURANCE PROVIDER</b>			
<b>ANNUAL PREMIUM</b>			
<b>STEPPED/LEVEL PREMIUM</b>			
<b>POLICY COMMENCEMENT DATE</b>			
<b>Complete the following for Income Protection ONLY</b>			
<b>BENEFIT PERIOD</b>			
<b>WAITING PERIOD</b>			
<b>AGREED/INDEMNITY</b>			

	POLICY 1	POLICY 2	POLICY 3
<b>TYPE</b>			
<b>POLICY OWNER</b> (If Insurance is maintained through superannuation, please note the Fund name)			
<b>LIFE INSURED</b>			
<b>SUM INSURED</b> (Benefit Amount)			
<b>INSURANCE PROVIDER</b>			
<b>ANNUAL PREMIUM</b>			
<b>STEPPED/LEVEL PREMIUM</b>			
<b>POLICY COMMENCEMENT DATE</b>			
<b>Complete the following for Income Protection ONLY</b>			
<b>BENEFIT PERIOD</b>			
<b>WAITING PERIOD</b>			
<b>AGREED/INDEMNITY</b>			

PROVIDE POLICY DOCUMENTATION IF POSSIBLE

## OTHER INSURANCE HELD

<b>TYPE</b>	
<b>HOME &amp; CONTENTS</b>	
<b>HEALTH:</b>	
<b>MOTOR VEHICLE:</b>	
<b>MORTGAGE:</b>	



## RISK PROFILE

Indicate preference on arrow below:

<b>0 years</b> ←————→ <b>10+ years</b> <b>Investment timeframe</b>	Comments:
<b>Low</b> ←————→ <b>High</b> <b>Investment experience</b>	Comments:
<b>Security</b> ←————→ <b>Growth</b> <b>Investment objective</b>	Comments:

Risk Profile	Income/ Growth Split	Investor Type
<b>Secure</b>	<b>100% Income</b>	This portfolio focuses entirely on the preservation of capital. As such the return is likely to be low and consistent compared with the other risk options offered. The portfolio is restricted in its ability to reduce taxable income or the tax effectiveness of that income. It is not an appropriate investment option for medium to long-term investors seeking capital growth.
<b>Defensive</b>	<b>80% Income 20% Growth</b>	This is an income-focused portfolio that has a small exposure to growth assets. The main emphasis is on generating income, with some capital risk in order to achieve overall portfolio growth. It is expected to have a low fluctuation in short-term value, with some small shorter-term capital risk. The income generated by the portfolio may have a small tax benefit from some share dividend franking credits. It is suited to an investor who either seeks a high level of income or has a relatively short investment time frame.
<b>Conservative</b>	<b>60% Income 40% Growth</b>	For investors who are seeking an income stream with some capital growth attached. It has a high exposure to fixed income securities, but also includes exposure to share and property markets. It is suited to medium-term investors who are seeking a reasonable degree of capital stability, but who also want to protect their assets from inflation. Some tax relief on income may be available from franking credits.
<b>Balanced</b>	<b>40% Income 60% Growth</b>	Using a slightly higher exposure to growth assets than income assets, this portfolio is expected to have lower short-term fluctuations in value than the other growth-based investment portfolios. Its aim is to produce capital growth in a medium- to long-term time frame. It has a "balanced" exposure to shares, property and fixed income assets, while the income generated by the portfolio may be partially tax effective.
<b>Growth</b>	<b>20% Income 80% Growth</b>	A growth-oriented portfolio that is best suited to long-term investors. A small income exposure should slightly reduce the shorter-term fluctuations of the portfolio's value. It is best suited to a long-term investor who can accept some investment risk over the long-run. The income stream may be partially tax effective and the portfolio has a high exposure to share and property to provide long-term investment growth.
<b>High Growth</b>	<b>100% Growth</b>	A 100% growth based portfolio with no exposure to income assets. It has a strong emphasis on maximising capital growth over the long term. The portfolio is likely to produce a minimal, tax effective income. Investors should expect high short-term fluctuations in values and a higher chance of capital loss. However, they are prepared to accept this as a trade off in achieving their long-term investment objective.

Further comments:

**Remember, this profile is only a guide.** If you are not comfortable with the recommended profile, (or you and your partner have different profiles) we can start with a lower risk profile and review it over time as you become more comfortable with investment markets. But please be aware that risk and return are closely related, so by choosing a lower risk profile, you are also choosing to reduce your longer term return expectations.

**Risk Profile selected**      **Client 1:** \_\_\_\_\_      **Client 2:** \_\_\_\_\_

*Client Acknowledgement (for our records).*

I/We confirm that the details recorded above are correct and reflect my/our attitude to risk.

Name: \_\_\_\_\_ Name: \_\_\_\_\_

Signature: \_\_\_\_\_ Signature: \_\_\_\_\_

Date: \_\_\_\_\_ Date: \_\_\_\_\_



**CLIENT AUTHORISATION**

**Clients Name/s:** \_\_\_\_\_

- We acknowledge that we have received, read and fully understood Bridgewood Private Wealth Pty Ltd's Financial Services Guide & Adviser Profile.
- We acknowledge that we have received, read and fully understood Bridgewood Private Wealth Pty Ltd's Privacy Policy.
- We give permission for our related tax file number(s), as provided to be held by my adviser, an authorised representative of Bridgewood Private Wealth Pty Ltd, to be forwarded to financial institutions as requested or as necessary and/or to be retained on our file.

**Client TFN:** \_\_\_\_\_ **Partner TFN:** \_\_\_\_\_

- We give permission for our personal financial information being forwarded to our accountant/tax agent solicitor, Centrelink or Veterans Affairs as requested by us from time to time.
- We hereby declare that the information set out in this form is true and correct to the best of our knowledge.
- We understand any recommendations (to be provided in the form of a Statement of Advice) will be based solely on the information supplied in this form.
- We give permission to provide Product Disclosure Statements (PDS) to us in electronic format.
- We agree to the preparation of a Statement of Advice limited to the following issues:

- |   |  |
|---|--|
| <input type="checkbox"/> <b>Superannuation</b>              | <input type="checkbox"/> <b>Retirement Planning</b>  |
| <input type="checkbox"/> <b>Death &amp; TPD Insurance</b>   | <input type="checkbox"/> <b>Saving strategies</b>    |
| <input type="checkbox"/> <b>Trauma Insurance</b>            | <input type="checkbox"/> <b>Gearing</b>              |
| <input type="checkbox"/> <b>Income Protection Insurance</b> | <input type="checkbox"/> <b>Personal Investments</b> |
| <input type="checkbox"/> <b>Key man Insurance</b>           | <input type="checkbox"/> <b>Tax Planning</b>         |
| <input type="checkbox"/> <b>Estate Planning</b>             | <input type="checkbox"/> <b>Debt Management</b>      |
| <input type="checkbox"/> <b>Centrelink</b>                  | <input type="checkbox"/> <b>Budgeting</b>            |
| <input type="checkbox"/> <b>Other, please specify.....</b>  |  |

- We acknowledge that a Statement of Advice Preparation Fee of \$\_\_\_\_\_ is payable upon the presentation of the Statement of Advice to us.

**Signed:** \_\_\_\_\_  
(CLIENT 1)

**Signed:** \_\_\_\_\_  
(CLIENT 2)

**Date:** \_\_\_\_/\_\_\_\_/\_\_\_\_

**Date:** \_\_\_\_/\_\_\_\_/\_\_\_\_

**Signed:** \_\_\_\_\_  
**Representative/Authorised Representative**

**Date:** \_\_\_\_/\_\_\_\_/\_\_\_\_

