

NORRINGTONS

Core Financial Information

Client Reference

Client 1

Client 2

In order for us to advise you regarding your financial planning requirements, it is essential that we obtain current and relevant information. Therefore, please therefore complete the following details as comprehensively as you are able.

If you choose to omit various sections you should be aware that our advice will be based only on the information provided.

Date of completion

Update 1

Update 2

Date of issue

IDD

Client agreement

Menu

Reasons for Meeting

Unless requested below a full review will be carried out. If you wish to restrict advice to specific areas then there may be additional needs that will not be addressed or the advice may be different than if a full review had been conducted.

Restricted review/Limited advice Yes* No

*Please complete the areas you wish to have reviewed below:

| | Client 1 | Client 2 |
|--|--------------------------|--------------------------|
| Personal protection (death, ill health, medical costs etc.) | <input type="checkbox"/> | <input type="checkbox"/> |
| Pension Planning | <input type="checkbox"/> | <input type="checkbox"/> |
| Retirement options | <input type="checkbox"/> | <input type="checkbox"/> |
| Investment planning (either regular, lump sum or both) | <input type="checkbox"/> | <input type="checkbox"/> |
| IHT Planning | <input type="checkbox"/> | <input type="checkbox"/> |
| Mortgage needs | <input type="checkbox"/> | <input type="checkbox"/> |
| Equity Release | <input type="checkbox"/> | <input type="checkbox"/> |
| Long Term Care | <input type="checkbox"/> | <input type="checkbox"/> |
| General Insurance needs | <input type="checkbox"/> | <input type="checkbox"/> |

Notes regarding your needs

Core Details

| | Client 1 | Client 2 |
|--------------------------------|---|---|
| Title | Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms. <input type="checkbox"/> Miss <input type="checkbox"/> Dr <input type="checkbox"/> Other <input type="checkbox"/> | Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms. <input type="checkbox"/> Miss <input type="checkbox"/> Dr <input type="checkbox"/> Other <input type="checkbox"/> |
| Forenames | | |
| Surname | | |
| Full Postal Address | | |
| Postcode | | |
| Email address | | |
| Home/Mobile Telephone | H: M: | H: M: |
| Date of Birth | | |
| Sex | | |
| Marital Status | | |
| Are you in good health? | <input type="checkbox"/> Yes <input type="checkbox"/> No* | <input type="checkbox"/> Yes <input type="checkbox"/> No* |
| Do you smoke? | <input type="checkbox"/> Yes* <input type="checkbox"/> No | <input type="checkbox"/> Yes* <input type="checkbox"/> No |
| UK domiciled & UK tax resident | <input type="checkbox"/> Yes <input type="checkbox"/> No* | <input type="checkbox"/> Yes <input type="checkbox"/> No* |
| Employment Status | Employed <input type="checkbox"/> Self-employed <input type="checkbox"/> Retired <input type="checkbox"/> Job Seeker <input type="checkbox"/> Other* <input type="checkbox"/> | Employed <input type="checkbox"/> Self-employed <input type="checkbox"/> Retired <input type="checkbox"/> Job Seeker <input type="checkbox"/> Other* <input type="checkbox"/> |
| Occupation | | |
| Employer's Name | | |
| National Insurance Number | | |
| Intended Retirement Age | | |

*please provide details in the notes section including items like medication, residence status etc.

Do you have any dependants? Yes No

| Dependant's Name | D.O.B | Dependent On | Relationship & Reason for Dependency |
|------------------|-------|--------------|--------------------------------------|
| | | | |
| | | | |
| | | | |
| | | | |

Income

| | Client 1 | Client 2 |
|---|----------|----------|
| Gross employment income (p.a) | £ | £ |
| Gross pension income (p.a) | £ | £ |
| Any additional income received including bonuses* | £ | £ |
| Total monthly income (gross) | £ | £ |
| Total monthly income (Net) | £ | £ |

| | | |
|--|---|---|
| Current tax position | Nil Rate <input type="checkbox"/> Basic Rate <input type="checkbox"/> Lower Rate <input type="checkbox"/> Higher Rate <input type="checkbox"/> | Nil Rate <input type="checkbox"/> Basic Rate <input type="checkbox"/> Lower Rate <input type="checkbox"/> Higher Rate <input type="checkbox"/> |
| Are you aware of any likely changes to your income or employment status? | <input type="checkbox"/> Yes* <input type="checkbox"/> No | <input type="checkbox"/> Yes* <input type="checkbox"/> No |
| Salary review date | | |

*please provide details in the notes section.

Monthly Expenditure Details

Do you wish to provide a detailed breakdown? Yes No

| | Client 1 | Client 2 | Joint |
|------------------------------|----------|----------|----------|
| Fixed Household Costs | £ | £ | £ |
| Mortgage / Rent | £ | £ | £ |
| Council Tax | £ | £ | £ |
| Water Rates | £ | £ | £ |
| Gas | £ | £ | £ |
| Electricity | £ | £ | £ |
| Telephone/Broadband | £ | £ | £ |
| Food shopping | £ | £ | £ |
| Building/contents insurance | £ | £ | £ |
| TV / Satellite / Cable | £ | £ | £ |
| Transportation Costs | £ | £ | £ |
| Fuel | £ | £ | £ |
| Car Tax | £ | £ | £ |
| Car insurance | £ | £ | £ |
| Servicing and maintenance | £ | £ | £ |
| Breakdown cover | £ | £ | £ |
| Public Transport | £ | £ | £ |
| Financials | £ | £ | £ |
| Credit/Store Card repayments | £ | £ | £ |
| Loans/HP/Rental agreements | £ | £ | £ |
| Savings | £ | £ | £ |
| Life Insurance | £ | £ | £ |
| Pension contributions | £ | £ | £ |
| Accident & Sickness Cover | £ | £ | £ |
| Healthcare (dentist, etc) | £ | £ | £ |
| Miscellaneous | £ | £ | £ |
| Maintenance / Alimony | £ | £ | £ |
| School Fees | £ | £ | £ |
| Holidays | £ | £ | £ |

| | Client 1 | Client 2 | Joint |
|--|----------|----------|----------|
| Clothing | £ | £ | £ |
| Other Ad Hoc costs | £ | £ | £ |
| Total Outgoings | £ | £ | £ |
| Surplus Income (net monthly income less total outgoings) | £ | £ | £ |

Summary of Assets (further details need to be provided in the policy schedule)

| | Client 1 | Client 2 | Joint |
|------------------------------|----------|----------|----------|
| Home | £ | £ | £ |
| Other property | £ | £ | £ |
| Cash | £ | £ | £ |
| Investment Bonds | £ | £ | £ |
| Pension Funds | £ | £ | £ |
| ISA/PEP's | £ | £ | £ |
| Unit/Investment Trusts OEICS | £ | £ | £ |
| Shares | £ | £ | £ |
| Business Assets | £ | £ | £ |
| All Other Assets | £ | £ | £ |
| Total Assets | £ | £ | £ |

Summary of Liabilities

| | Client 1 | Client 2 | Joint |
|--|----------|----------|----------|
| Mortgage (main residence) | £ | £ | £ |
| Credit cards | £ | £ | £ |
| Overdraft | £ | £ | £ |
| Loans/HP | £ | £ | £ |
| Mortgage (other property) | £ | £ | £ |
| Any Other Lending* | £ | £ | £ |
| *please provide details in the notes section | | | |
| Total Debt | £ | £ | £ |

Breakdown of Liabilities

Do you have a mortgage? Yes* No

| Provider | Mortgage Owner | Type | Repayment Date | Interest Basis | Amount O/S | Interest rate payable | Current deal end date | Redemption penalty end date |
|----------|--|---|----------------|---|------------|-----------------------|-----------------------|-----------------------------|
| | Client 1 <input type="checkbox"/> Client 2 <input type="checkbox"/> Joint <input type="checkbox"/> | Repayment <input type="checkbox"/> Interest Only <input type="checkbox"/> Both <input type="checkbox"/> | | Fixed <input type="checkbox"/> Discount <input type="checkbox"/> Variable <input type="checkbox"/> Other* <input type="checkbox"/> | £ | | | |
| | Client 1 <input type="checkbox"/> Client 2 <input type="checkbox"/> Joint <input type="checkbox"/> | Repayment <input type="checkbox"/> Interest Only <input type="checkbox"/> Both <input type="checkbox"/> | | Fixed <input type="checkbox"/> Discount <input type="checkbox"/> Variable <input type="checkbox"/> Other* <input type="checkbox"/> | £ | | | |
| | Client 1 <input type="checkbox"/> Client 2 <input type="checkbox"/> Joint <input type="checkbox"/> | Repayment <input type="checkbox"/> Interest Only <input type="checkbox"/> Both <input type="checkbox"/> | | Fixed <input type="checkbox"/> Discount <input type="checkbox"/> Variable <input type="checkbox"/> Other* <input type="checkbox"/> | £ | | | |
| | Client 1 <input type="checkbox"/> Client 2 <input type="checkbox"/> Joint <input type="checkbox"/> | Repayment <input type="checkbox"/> Interest Only <input type="checkbox"/> Both <input type="checkbox"/> | | Fixed <input type="checkbox"/> Discount <input type="checkbox"/> Variable <input type="checkbox"/> Other* <input type="checkbox"/> | £ | | | |

Notes

Please detail here any additional information for answers marked with an * and any other relevant details felt pertinent such as potential impending employment changes.

Attitude To Risk

In every walk of life people inadvertently act according to the level of risk they perceive the situation they encounter contains. If this level of risk is or is not acceptable, be it crossing the road or walking under a ladder, we automatically assume a level of risk we are prepared to accept, and act accordingly.

The situation is no different in the area of financial advice; any recommendation made needs to encompass the level of risk you are prepared to take to achieve your objectives. The major difference with financial advice is that what is deemed risky in the short term can be far lower risk in the long term and vice versa. For example, investing wholly in cash in the short term is low risk but over the long term the purchasing power of the monies would be eroded by inflation. This would not be offset by the increase in value and therefore would pose a higher risk to your wealth.

As your attitude to risk will change based on your age, the length of the investment term, the reason for the investment and the importance of the investment then this should be revisited on a regular basis to ensure it is still relevant.

Due to the importance of determining your correct attitude to risk we have a specially developed risk questionnaire you can complete objectively to help establish your attitude to risk. The questions are designed so we can understand your feelings and attitude towards such issues as:

- Short term fluctuations in your investments
- Inflation
- Returns against inflation
- Timescales for investment

Once this has been established, a sophisticated scoring model is used to determine both your attitude to risk and an asset allocation appropriate to your personal attitude to risk.

Please complete the questionnaire on the following pages to start this process.

On the next page is a description of the various levels of attitude to risk. This will enable you to understand and allow you to indicate your attitude to risk, should you feel you have a sufficient overall understanding of your attitude to risk without the need for an objective assessment.

Investment Risk Categories

| Risk Category | Description |
|------------------------------|--|
| Risk Averse | You are not prepared to invest in any area where your capital is at risk. You accept that this limits the scope of investment to deposit-based products and that returns on such products are typically at lower levels. This would typically mean a portfolio invested predominantly in cash or some other minimal risk assets such as government bonds, or money-market instruments. |
| Cautious | You would prefer not to take any risk with your investments, but you can be persuaded to do so to a limited extent. You would prefer to keep your money in the bank, but realise that other types of investments give better potential for longer term returns. This would typically mean a portfolio invested mostly in cash and fixed income, to include government stock (gilts) and corporate bonds. There may be a small equity component to enhance returns on longer-term investments. |
| Conservative | You understand that you need to take investment risk in order to be able to meet your long-term goals. On this basis, you are willing to take a risk with at least part of your available assets. This would typically mean a portfolio invested in a combination of government bonds, corporate bonds and there would also be an equity component to enhance longer term returns which would vary dependent on the intended investment term. |
| Moderate | You are happy to take on investment risk and understand that this is crucial in terms of generating long-term return. You are willing to take risk with most of your available assets. This would typically mean a portfolio invested in fixed income (to include government stock (gilts) and corporate bonds) and in equities, with broadly equal distribution between these asset types. |
| Moderately Aggressive | You are happy to take on investment risk and understand that this is crucial in terms of generating long-term return. You are willing to take risk with most of your available assets. This would typically mean a portfolio invested partly in fixed income (to include government stock (gilts) and corporate bonds), but with a larger equity component. |
| Aggressive | You are seeking higher potential for returns on your investments, and are willing to invest in areas that carry greater risk, using all of your assets in this way. This would typically mean a portfolio invested completely in equities. An aggressive investor seeking higher returns, but with a short investment term may choose to allocate a proportion of their assets in more liquid, lower risk assets such as corporate bonds. |

Please note that the investment make up of each attitude to risk is merely indicative and these can and no doubt will vary based on the time horizon of the investment goal

Please indicate which single category best reflects your attitude to risk or which has been indicated by the questionnaire results:

| | Risk Averse | Cautious | Conservative | Moderate | Moderately Aggressive | Aggressive |
|-----------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| Client 1 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Client 2 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Please provide any other information relevant to determining your attitude to risk in the notes section.

Attitude To Risk Questionnaire

| | | Client 1 | Client 2 |
|----|--|--|--|
| 1 | I find investment and other financial matters easy to understand. | Strongly Agree <input type="checkbox"/> Agree <input type="checkbox"/> No Strong Opinion <input type="checkbox"/> Disagree <input type="checkbox"/> Strongly Disagree <input type="checkbox"/> | Strongly Agree <input type="checkbox"/> Agree <input type="checkbox"/> No Strong Opinion <input type="checkbox"/> Disagree <input type="checkbox"/> Strongly Disagree <input type="checkbox"/> |
| 2 | Usually it takes me a long time to make up my mind on financial matters. | Strongly Agree <input type="checkbox"/> Agree <input type="checkbox"/> No Strong Opinion <input type="checkbox"/> Disagree <input type="checkbox"/> Strongly Disagree <input type="checkbox"/> | Strongly Agree <input type="checkbox"/> Agree <input type="checkbox"/> No Strong Opinion <input type="checkbox"/> Disagree <input type="checkbox"/> Strongly Disagree <input type="checkbox"/> |
| 3 | I have little experience of investing in stocks and shares. | Strongly Agree <input type="checkbox"/> Agree <input type="checkbox"/> No Strong Opinion <input type="checkbox"/> Disagree <input type="checkbox"/> Strongly Disagree <input type="checkbox"/> | Strongly Agree <input type="checkbox"/> Agree <input type="checkbox"/> No Strong Opinion <input type="checkbox"/> Disagree <input type="checkbox"/> Strongly Disagree <input type="checkbox"/> |
| 4 | I associate the word 'risk' with the idea of 'thrill'. | Strongly Agree <input type="checkbox"/> Agree <input type="checkbox"/> No Strong Opinion <input type="checkbox"/> Disagree <input type="checkbox"/> Strongly Disagree <input type="checkbox"/> | Strongly Agree <input type="checkbox"/> Agree <input type="checkbox"/> No Strong Opinion <input type="checkbox"/> Disagree <input type="checkbox"/> Strongly Disagree <input type="checkbox"/> |
| 5 | When it comes to investing, I'd rather be safe than sorry. | Strongly Agree <input type="checkbox"/> Agree <input type="checkbox"/> No Strong Opinion <input type="checkbox"/> Disagree <input type="checkbox"/> Strongly Disagree <input type="checkbox"/> | Strongly Agree <input type="checkbox"/> Agree <input type="checkbox"/> No Strong Opinion <input type="checkbox"/> Disagree <input type="checkbox"/> Strongly Disagree <input type="checkbox"/> |
| 6 | I'd rather take my chances with high risk / high return investments than have to increase the amount I am saving. | Strongly Agree <input type="checkbox"/> Agree <input type="checkbox"/> No Strong Opinion <input type="checkbox"/> Disagree <input type="checkbox"/> Strongly Disagree <input type="checkbox"/> | Strongly Agree <input type="checkbox"/> Agree <input type="checkbox"/> No Strong Opinion <input type="checkbox"/> Disagree <input type="checkbox"/> Strongly Disagree <input type="checkbox"/> |
| 7 | I am willing to take substantial financial risk to earn substantial returns. | Strongly Agree <input type="checkbox"/> Agree <input type="checkbox"/> No Strong Opinion <input type="checkbox"/> Disagree <input type="checkbox"/> Strongly Disagree <input type="checkbox"/> | Strongly Agree <input type="checkbox"/> Agree <input type="checkbox"/> No Strong Opinion <input type="checkbox"/> Disagree <input type="checkbox"/> Strongly Disagree <input type="checkbox"/> |
| 8 | I am not willing to take any financial risk. | Strongly Agree <input type="checkbox"/> Agree <input type="checkbox"/> No Strong Opinion <input type="checkbox"/> Disagree <input type="checkbox"/> Strongly Disagree <input type="checkbox"/> | Strongly Agree <input type="checkbox"/> Agree <input type="checkbox"/> No Strong Opinion <input type="checkbox"/> Disagree <input type="checkbox"/> Strongly Disagree <input type="checkbox"/> |
| 9 | I generally look for the safest type of investment, even if that means lower returns. | Strongly Agree <input type="checkbox"/> Agree <input type="checkbox"/> No Strong Opinion <input type="checkbox"/> Disagree <input type="checkbox"/> Strongly Disagree <input type="checkbox"/> | Strongly Agree <input type="checkbox"/> Agree <input type="checkbox"/> No Strong Opinion <input type="checkbox"/> Disagree <input type="checkbox"/> Strongly Disagree <input type="checkbox"/> |
| 10 | I feel comfortable about investing in the stock market. | Strongly Agree <input type="checkbox"/> Agree <input type="checkbox"/> No Strong Opinion <input type="checkbox"/> Disagree <input type="checkbox"/> Strongly Disagree <input type="checkbox"/> | Strongly Agree <input type="checkbox"/> Agree <input type="checkbox"/> No Strong Opinion <input type="checkbox"/> Disagree <input type="checkbox"/> Strongly Disagree <input type="checkbox"/> |
| 11 | I prefer the safety of keeping my money in the bank. | Strongly Agree <input type="checkbox"/> Agree <input type="checkbox"/> No Strong Opinion <input type="checkbox"/> Disagree <input type="checkbox"/> Strongly Disagree <input type="checkbox"/> | Strongly Agree <input type="checkbox"/> Agree <input type="checkbox"/> No Strong Opinion <input type="checkbox"/> Disagree <input type="checkbox"/> Strongly Disagree <input type="checkbox"/> |
| 12 | People who know me would describe me as a bit of a gambler. | Strongly Agree <input type="checkbox"/> Agree <input type="checkbox"/> No Strong Opinion <input type="checkbox"/> Disagree <input type="checkbox"/> Strongly Disagree <input type="checkbox"/> | Strongly Agree <input type="checkbox"/> Agree <input type="checkbox"/> No Strong Opinion <input type="checkbox"/> Disagree <input type="checkbox"/> Strongly Disagree <input type="checkbox"/> |

Policies

For employer benefits please include these where possible in the following tables (for PHI these need to be included in the notes section) with the owner as employer, with plan types such as DIS – death in service, FS - final Salary scheme.

Protection And General Insurance Policies

Do you currently have any policies? Yes* No

| Owner | Provider | Policy Number | Product/Plan Type | Gross Premium (£) | Premium Frequency | In Force | Waiver | In Trust | Term | Life Sum Assured (£) | CIC Sum Assured (£) |
|-------|----------|---------------|-------------------|-------------------|-------------------|----------|--------|----------|------|----------------------|---------------------|
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |

If you wish to provide details of the funds invested in refer to next page.

Pension Policies

Do you currently have any policies? Yes* No

| Owner | Provider | Policy Number | Product/Plan Type | Premium (£) | Premium Frequency | In Force | Waiver | Additional Life Cover (£) | Last Valuation (£) |
|-------|----------|---------------|-------------------|-------------|-------------------|----------|--------|---------------------------|--------------------|
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |

If you wish to provide details of the funds invested in refer to next page.

Savings And Investment Policies

Do you currently have any policies? Yes* No

| Owner | Provider | Policy Number | Product/Plan Type | Premium (£) | Premium Frequency | In Force | In Trust | Last Valuation (£) |
|-------|----------|---------------|-------------------|-------------|-------------------|----------|----------|--------------------|
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |

Data Protection Statement

The information you have provided is subject to the Data Protection Act 1998 (the "Act"). By signing this document you consent to us or any company associated with us (such companies include, for the avoidance of doubt, Bankhall Investment Associates Limited and any member of its group and/or companies, persons or entities of any nature whatsoever with which it is associated or allied from time to time) processing, both manually and by electronic means, your personal data for the purposes of providing advice, administration and management. "Processing" includes obtaining, recording or holding information or data, transferring it to other companies associated with us, product providers, the FSA or any other statutory, governmental or regulatory body for legitimate purposes including, where relevant, to solicitors and/or other debt collection agencies for debt collection purposes and carrying out operations on the information or data.

We may also contact you or pass your details to other companies associated with us to contact you (including by telephone) with details of any other similar products, promotions, or for related marketing purposes in which we think you may be interested.

The information provided may also contain sensitive personal data for the purposes of the Act, being information as to your physical or mental health or condition; the commission or alleged commission of any offence by you; any proceedings for an offence committed or alleged to have been committed by you, including the outcome or sentence in such proceedings; your political opinions, religious or similar beliefs, sexual life; or your membership of a Trade Union.

Please tick this box to confirm your consent to us or any company associated with us processing any such sensitive personal data.
If you are happy for us or any company associated with us to contact you for marketing purposes by e-mail, telephone, post or SMS, please tick this box.

If at any time you wish us or any company associated with us to cease processing your personal data or sensitive personal data, or contacting you for marketing purposes, please contact The Data Protection Officer on 01473 226663 or in writing at 48 High Street, Ipswich IP1 3QJ.

You may be assured that we and any company associated with us will treat all personal data and sensitive personal data as confidential and will not process it other than for a legitimate purposes. Steps will be taken to ensure that the information is accurate, kept up to date and not kept for longer than is necessary. Measures will also be taken to safeguard against unauthorised or unlawful processing and accidental loss or destruction or damage to the data

Subject to certain exceptions, you are entitled to have access to your personal and sensitive personal data held by us. You may be charged a fee (subject to the statutory maximum) for supplying you with such data.

Client Categorisation

I am required to classify clients, before conducting designated investment business, into one of 3 groups define as follows:

- Retail Client** Afforded the highest level of regulatory protection. Retail clients are generally individual clients and small businesses or trusts.
- Professional Client** Considered to be more experienced, knowledgeable and sophisticated, able to assess their own risk. The definition also includes "elective professional clients" who have chosen to "opt up" and be classified as professional clients.
- Eligible Counterparty** Subject to a lighter touch regulatory regime – generally this will include regulated financial institutions, government bodies, central banks, supra national organisations.

Based on these I have classified you as:

| | | |
|---|---|---|
| Retail Client <input type="checkbox"/> | Professional Client <input type="checkbox"/> | Eligible Counterparty <input type="checkbox"/> |
|---|---|---|

Declarations

Client Declaration (please read carefully and then sign and date below)

I confirm that the information I have provided is, to the best of my knowledge correct. I have provided this information understanding that it is used to form the basis of any advice and recommendations made to me and that I am not under any obligation to take up any recommendation made.

I understand that recommendations may be made which involve a regular financial commitment or the investment of capital. Accordingly, I understand that I must be sure of the ability to meet that commitment having given consideration to all other expenditure, and the provision for any emergencies, which may require access to funds.

I confirm that I have received a Business card and an Initial Disclosure Document.

ADDITIONAL CLIENT DECLARATION (Please tick this box if the following is applicable)

I further declare that I did not want to disclose certain personal/financial information and I am aware that this may prevent an Adviser from being able to identify areas where it might have been appropriate to make recommendations, or which could have an effect on the recommendations that have been made.

NB: Please understand that we reserve the right to decline to give advice if full information is not provided.

| | |
|--|--|
| I confirm that the client/s has/have given consent to any data being passed to other companies in the Lender's Group for marketing and administrative purposes. | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| The client/s is/are aware that any information provided by them will be held by the Lender. I have advised the applicant/s that we may use their information to inform them about products or services offered by the Lender's Group and selected third parties. This may be by letter, telephone or other reasonable communication. | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| The client/s has/have confirmed that they would prefer not to receive any information about products and services provided by the Lender and ourselves. | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| The client/s has/have given their consent to the adviser, or the company contacting them in the future, to review their mortgage and protection arrangements. | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| The client/s is/are aware that they have the right of access to information we hold about them on our records. The client/s is/are aware that we reserve the right to charge an administration fee for the provision of this information. | <input type="checkbox"/> Yes <input type="checkbox"/> No |

Adviser Declaration

| | | |
|-----------------|-----------------|----------------|
| Client 1 | Client 2 | Adviser |
| Date | Date | Date |