

Financial Planning Questionnaire

Strictly Confidential

Prepared for :

Information current as at :

K A LINCOLN > INVESTMENTS

Creators of the 'Safety First Strategy' for Savings, Investments & Pensions

INDEPENDENT FINANCIAL ADVICE

K A LINCOLN > INVESTMENTS is a trading style of MortgageMaude Limited

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IMPORTANT NOTE – PLEASE READ CAREFULLY BEFORE COMPLETING

In order that we may advise you regarding your financial requirements, it is **essential** that we obtain from you current and relevant information. Please therefore complete the following details as comprehensively as you are able. Please feel free to expand on any answers on the back page or separate sheets if necessary.

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

Prior to completion you will find it useful to gather together the following:

Payslip / P60 / accounts || Bank, credit card, mortgage, savings and share statements || Life assurance, savings, PEP/ISA statements and other policy details/documents || Personal pension policy details /documents || Company/occupational pension statements and booklets

1 Your PERSONAL DETAILS

	Client	Your Spouse or Partner
Title	Mr / Mrs / Miss / Ms / Other	Mr / Mrs / Miss / Ms / Other
First Name(s)		
Surname		
Maiden Name		
Home Address		
Daytime Telephone Number		
Email address*		
Employment Status	Employed / Self-employed / Retired	Employed / Self-employed / Retired
Occupation		
If retired, previous occupation		
If employed, name of employer		
Date of Birth		
Marital Status		
UK Resident	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
UK Domiciled	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Sex	Male <input type="checkbox"/> Female <input type="checkbox"/>	Male <input type="checkbox"/> Female <input type="checkbox"/>
Do you smoke?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Are you in good health?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
If 'no', please give details		

DOCTOR / Company Name

Address

Postcode

Telephone

4 Current Value of Your ASSETS

	Client	Your Spouse or Partner	Jointly held
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Property

Home (primary residence)

£	£	£
£	£	£
£	£	£
Location if applicable	(e.g. France)	

Other UK property

Other overseas property

Cash

Current Accounts

Bank/Building Society deposits

TESSAs / Follow-on-TESSAs /
Cash ISAs

National Savings

£	£	£
£	£	£
£	£	
£	£	£

Investments

ISAs (Stocks & Shares)

Equities (Stock market Shares)

Unit Trusts / Investment Trusts /
OEICs

Investment / With Profit Bonds

Other Investments / Assets

TOTAL

£	£	
£	£	£
£	£	£
£	£	£
£	£	£
£	£	£

6 Details of your PENSIONS

Owner	Name of pension company	Type of arrangement	Current fund value	Current contribution level

7 Your PLANS FOR RETIREMENT

	You	Your spouse or partner
Your planned retirement date	/ /	/ /
The amount of income in today's terms you would like in retirement	£ pa	£ pa

8 Your LOANS & LIABILITIES

	Loan amount	Total monthly repayment cost	Term remaining
Mortgages/Credit Cards/Other Loans	£	£	
Interest rate			
Details			

9 Do you have the following protection?

	You		Your Spouse or Partner	
Life Assurance <small>(including Death in Service benefits)</small>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Critical Illness	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Income Protection	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Would you like a review of your current protection situation?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>

10 Your ATTITUDE TO INVESTMENT RISK

It is important that you are not only to take financial risk, but also able to. For instance, if you are retired you may no longer have the ability to replace any lost capital and therefore it maybe appropriate to reduce the investment risk in your portfolio. While you might like to consider these questions ahead of your meeting, people often find it easier to decide on the level of the risk they are comfortable taking after discussing it with their Financial Practitioner. You can complete this section during your first meeting if you prefer.

What level of investment risk are you willing and able to take with your overall portfolio?

Modest returns from secure investments where the only risk to my capital is inflation, e.g. cash deposits	<input type="text"/> %
Improved returns compared to those offered by deposit accounts to provide better protection against inflation. I accept that there may be some fluctuation in capital values.	<input type="text"/> %
A balanced investment approach with moderate risk to enhance potential returns. This may involve a greater amount of capital fluctuation and possible loss of capital.	<input type="text"/> %
A higher risk with part of my fund to achieve higher returns. I am prepared to accept greater fluctuations and an increased chance of capital loss.	<input type="text"/> %
Very high risks in order to achieve higher returns. I am prepared to accept significant fluctuations and the potential loss of capital in pursuit of long-term gains.	<input type="text"/> %

Are you happy with the level of risk you are taking on your existing portfolio? Yes No

How would you describe the investment risk of your existing portfolio?

11 Your ESTATE PLANNING PROVISIONS

	You	Your Spouse or Partner
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Have you made a will?

Yes

No

Yes

No

Main provisions

Are you expecting to receive inheritance over the next 5 years?

Yes

No

Yes

No

If 'Yes' please give details

Have you appointed a power of attorney?

Yes

No

Yes

No

12 Your KNOWLEDGE, EXPERIENCE AND OBJECTIVES

How would you describe your knowledge and experience of financial matters?

None 1 2 3 4 5 Excellent

Do you have any relevant professional qualifications (e.g. chartered accountant, actuary, etc)

Objectives

If you would prefer to detail your objectives in your own words please write them in the 'other useful information' box below.

Investment and savings

- To invest for growth
- To invest for income
- To review my portfolio
- To save regularly to build capital
- To plan for school fees/university costs

Inheritance tax planning

- To reduce the inheritance tax payable on my estate

Retirement and pension planning

- To build a worthwhile pension fund
- To take the benefits from my pension
- To reduce charges on existing pension plans

Protection

- To protect my family/repay my mortgage in the event of death/critical illness
- To protect income in the event of illness
- To review existing policies to see if savings can be made

Mortgages

- Buying a property in the UK
- Buying a property abroad
- If so where?
- Remortgaging (to raise money/save money)
- Buy-to-let

What are your investment time frames?

3+ years Undefined period (no specific objectives)

Retirement Other

Other useful information

What has prompted your enquiry to us? What specific help do you want from us?

Are you aware of any changes in your circumstances that could affect your future financial plans?

Please continue overleaf as required

Other useful information – continued

Blank area for providing other useful information.

THANK YOU FOR TAKING THE TIME TO COMPLETE THIS QUESTIONNAIRE.

Client	Your Spouse or Partner
Name: (please print)	Name: (please print)
Signature:	Signature:
Date:	Date:

The information provided will be treated in the strictest confidence and used to make recommendations in relation to your financial goals. It may be held on computer for future marketing purposes. Where blank spaces are left, it is assumed that the question is not applicable or that the answer is nil. We are entitled to assume that this is a complete and accurate statement and produce our recommendations accordingly.

The information will be used to prepare our recommendations and ensure that they are specifically tailored to your circumstances. It is important that you provide as much pertinent information as possible in order to help us give you the best advice. A copy will be kept on file; we will treat this information in accordance with the terms of the Data Protection Act.

Additional information, in the form of identification documents, will be required to comply with current regulations.