



SHORT QUESTIONNAIRE ... STRICTLY PRIVATE & CONFIDENTIAL!

Please complete and return via scanned mail attachment for a cost and obligation free assessment.

Table with 2 columns: YOU and PARTNER. Rows include Name, Address, Email, Tel, Mob, DOB, Smoker, Wage/Salary, Occupation, Employed / Self-Employed, and Company or Trust.

- Ages of any dependents: _____
• Business Premises Value \$_____ or Monthly Rent \$_____ Business Goodwill \$_____
• Home value \$_____ Home Mortgage \$_____
• Value of your all your combined investments \$_____ ... And your combined debts \$_____
• Realistic Purchase Price of Intended Next Property (Home / Business / Both Combined) \$_____
• Do you work at or from home (e.g. tradie, mobile service provider, professional, etc)? Yes / No
• Whether yes or no to the above (full or part time), do you want a deduction for home mortgage interest so as to (1) pay off your current home faster or (2), extend it for more space, value & comfort or (3), to upgrade it to something & somewhere better (& without paying capitals gains tax at sale)? Yes/ No
• Looking to save money on your business bookkeeping & tax preparation services? Yes / No or N/A
• Looking to own positive cash flow, residential investment property? Yes / No
• Looking for a better deal on your home, business or commercial loans? Yes / No
• Do you want yourself, your family, your home, your investments & or your business, to remain financially intact in case of your untimely death, disability, serious illness & or accident? Yes / No
• Looking to save money on & or improve upon the protection of any existing life insurances? Yes / No
• With incentive, about how much can you save every month? \$_____
• How much do you have in managed investment funds? \$_____
• Please estimate the combined account balances of yours and your partner's super \$_____
• Are you up to date on the flexibility, control, leverage and regulations with self managed super? Yes / No
• Do you have 1 - 3 trusted others with whom you could combine super for greater effect? Yes / No
• Are you interested in building up some quality property investments? Yes / No
• Rank your two main financial hopes & circle how much help you might need to make these come true:
1. _____ - none / some / lots
2. _____ - none / some / lots
• In working on your finances with a professional strategic adviser, what would be a turn on or a turn-off ?
• Turn-On _____ Turn-Off _____
• Turn-On _____ Turn Off _____
• Are you largely responsible for your family's financial future? Yes / No
• Would you likely implement professional advice as carefully tailored to your situation? Yes / No
• Please note anything else you'd like considered? _____

Date: ____ / ____ / ____

When complete please email to: frank@intellisolve.com.au

Congratulations on investing these few minutes into your future well being!