

## FINANCIAL PLANNING QUESTIONNAIRE

Ward Williams Financial Services Limited wish to give you the best possible financial advice. That is why our Financial Planning Questionnaire asks rather detailed questions. They help our adviser to understand your situation properly and to give you the most appropriate advice for your aims and needs. ***Please check the information you provide on this form carefully before you consent to our use of it in providing financial advice.***

### Introduced by / Source

| BUSINESS DETAILS        |  |
|-------------------------|--|
| NAME                    |  |
| Listed                  |  |
| ADDRESS 1               |  |
| ADDRESS 2               |  |
| ADDRESS 3               |  |
| TOWN                    |  |
| COUNTY                  |  |
| POSTCODE                |  |
| TELEPHONE NUMBER        |  |
| FAX NUMBER              |  |
| NAME OF CONTACT         |  |
| NATURE OF BUSINESS      |  |
| DATE ESTABLISHED        |  |
| DIRECTOR/SENIOR PARTNER |  |
| SHARE OWNERSHIP DETAILS |  |
| ACCOUNTANT              |  |
| SOLICITOR               |  |

| CONTACTS           |      |       |           |
|--------------------|------|-------|-----------|
|                    | NAME | EMAIL | TELEPHONE |
| FINANCIAL DIRECTOR |      |       |           |
| COMPANY SECRETARY  |      |       |           |
| HR CONTACT         |      |       |           |
| OTHER              |      |       |           |

| PRINCIPLE ASSETS       |   |                        |   |
|------------------------|---|------------------------|---|
| PREMISES – DESCRIPTION |   | PREMISES – VALUE       | £ |
| OTHER PROPERTY         |   | OTHER PROPERTY – VALUE | £ |
| SUBJECT TO MORTGAGE?   |   | MORTGAGE TERMS         |   |
| CASH/BANK DEPOSITS     | £ | QUOTED INVESTMENTS     | £ |
| OTHER ASSETS - DETAILS |   | OTHER ASSETS - VALUE   | £ |

### BRIEF TRADING SUMMARY (3 YEARS)

|                    |  |                      |   |
|--------------------|--|----------------------|---|
| FINANCIAL YEAR END |  | CORPORATION TAX RATE | % |
|--------------------|--|----------------------|---|

| YEAR                      | CURRENT | PREVIOUS | YEAR BEFORE |
|---------------------------|---------|----------|-------------|
| NO. OF EMPLOYEES          |         |          |             |
| TURNOVER                  |         |          |             |
| GROSS PROFIT              |         |          |             |
| NET PROFIT AFTER TAX      |         |          |             |
| IF CO, WAS DIVIDEND PAID? |         |          |             |

|                                     |  |
|-------------------------------------|--|
| WHAT PLANS ARE THERE FOR EXPANSION? |  |
|-------------------------------------|--|

### VALUE OF BUSINESS ETC

|  |                   |      |
|--|-------------------|------|
| APPROX CURRENT VALUE OF BUSINESS   | £                 |      |
| SHARE VALUATION, IF APPLICABLE   | £                 | DATE |
| DETAILS OF ANY PERSONAL LOANS FROM DIRECTORS/SHAREHOLDERS/PARTNERS                         | AMOUNTS           |      |
|  | INCEPTION DATES   |      |
|  | REPAYMENT PERIODS |      |
| WHAT ARRANGEMENTS ARE IN PLACE FOR THE REPAYMENT OF LOANS IN THE EVENT OF DEATH?           |                   |      |
| WHAT ARRANGEMENTS ARE IN PLACE FOR THE REPAYMENT OF LOANS IN THE EVENT OF SERIOUS ILLNESS? |                   |      |

### BORROWINGS

| SOURCE                  | BANKS | MORTGAGES | OVERDRAFTS | OTHER |
|-------------------------|-------|-----------|------------|-------|
| AMOUNT                  |       |           |            |       |
| INCEPTION DATE          |       |           |            |       |
| CURRENT INTEREST %      |       |           |            |       |
| REPAYMENT PERIOD        |       |           |            |       |
| GUARANTOR?              |       |           |            |       |
| REPAYMENT BASIS         |       |           |            |       |
| CHANGES LIKELY?         |       |           |            |       |
| LIFE POLICIES ATTACHED? |       |           |            |       |

**DIRECTORS OR PARTNERS**

|                          |  |  |  |
|--------------------------|--|--|--|
| NAME                     |  |  |  |
| DATE OF BIRTH            |  |  |  |
| ROLE WITHIN BUSINESS     |  |  |  |
| EXPECTED RETIREMENT AGE  |  |  |  |
| DATE JOINED COMPANY      |  |  |  |
| REMUNERATION             |  |  |  |
| BONUSES                  |  |  |  |
| DIVIDEND                 |  |  |  |
| BIK                      |  |  |  |
| PERCENTAGE OF SHARES     |  |  |  |
| ALSO 'KEY PERSON'?       |  |  |  |
| KEY PERSON COVER         |  |  |  |
| DATE COVER LAST REVIEWED |  |  |  |

**OTHER KEY PERSONS (NON-DIRECTORS/NON-PARTNERS)**

|                          |  |  |  |
|--------------------------|--|--|--|
| NAME                     |  |  |  |
| DATE OF BIRTH            |  |  |  |
| ROLE WITHIN BUSINESS     |  |  |  |
| KEY PERSON COVER         |  |  |  |
| DATE COVER LAST REVIEWED |  |  |  |

**SHARE PURCHASE / PARTNERSHIP PROTECTION**

|   |          |
|---|----------|
| IS THERE A SHARE PURCHASE AGREEMENT IN PLACE?                         | YES / NO |
| IS THERE ANY SHARE PURCHASE INSURANCE UNDERPINNING SUCH AN AGREEMENT? | YES / NO |
| DETAILS OF SUMS ASSURED, LIVES ASSURED, INSURERS ETC                  |          |
| DATE COVER WAS LAST REVIEWED  |          |
| OTHER (MAJOR) SHAREHOLDERS / INTERESTED PARTIES                       |          |

**RETIREMENT PROVISIONS**

|                            | SCHEME 1 | SCHEME 2 | SCHEME 3 |
|----------------------------|----------|----------|----------|
| TYPE OF PENSION            |          |          |          |
| PROVIDER                   |          |          |          |
| SCHEME REFERENCE           |          |          |          |
| MEMBERSHIP                 |          |          |          |
| INCEPTION DATE             |          |          |          |
| CONTRIBUTION BASIS         |          |          |          |
| ANNUAL CONTRIBUTION        |          |          |          |
| NORMAL RETIREMENT AGE      |          |          |          |
| APPROXIMATE ASSETS         |          |          |          |
| INVESTMENT TYPE            |          |          |          |
| DATE LAST REVIEWED         |          |          |          |
| SATISFACTION WITH PROVIDER |          |          |          |

**EMPLOYEE BENEFITS**

|                            | GROUP LIFE | GROUP PHI | GROUP PMI |
|----------------------------|------------|-----------|-----------|
| PROVIDER                   |            |           |           |
| SCHEME REFERENCE           |            |           |           |
| MEMBERSHIP                 |            |           |           |
| INCEPTION DATE             |            |           |           |
| BENEFITS                   |            |           |           |
| EXPIRY                     |            |           |           |
| ANNUAL PREMIUM             |            |           |           |
| DATE LAST REVIEWED         |            |           |           |
| SATISFACTION WITH PROVIDER |            |           |           |



**DECLARATION**

**We can confirm that we have been given the following:**

Client Agreement Letter

Business Card

**All the information we have given is correct to the best of my/our knowledge.**

**If there are any areas where I have been unable or unwilling to provide information, I accept that the advice I am given is in the absence of this information.**

**Signature**

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**Position**

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**Date**

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**I confirm that I have filled in this form and am authorised by the FCA (Financial Conduct Authority) to do so.**

**I confirm that any alterations or blanks have been agreed by the client / clients.**

|                  |  |                |
|------------------|--|----------------|
| <b>Signature</b> |  | <b>Name</b>    |
| <b>Date</b>      |  | <b>ADVISER</b> |