

ANZ Financial Planning

ANZ Business Banking

Financial Planning Borrower's Application Form

To help you through the process of applying for finance, whether it be acquiring a practice, refinancing or purchasing capital assets for growth of the financial planning practice, please take some time to read and complete the Financial Planning Borrower's Application.

The ANZ Financial Planning Borrower's Application Form consists of 5 sections.

Please complete relevant sections, depending on your needs. Some sections may not be applicable.

Part 1 General Business Details

Part 2 Bank Facility Details

Part 3 Specific Business Details

Part 4 Acquiring a Financial Practice

Part 5 Provision of Documents Checklist

PART – 1 *General Business Details*

This section includes required information so that ANZ can understand who are the key contacts, their details and the name of the Practice and the Dealer Group.

Full legal name of the financial planning practice (<i>herein called the Practice</i>):		
ABN / ACN: (if applicable)		
Name of Entity / Individual / Dealer Group that holds the AFS Licence:		
Relationship of Practice to AFS Licensee <i>i.e. whether Authorised Representative, Branch</i> :		
If Practice is not an Authorised Representative, please name the Authorised Representative:		
Contact person:		
Business Address:		
Business Phone:	Business Fax:	Business Email:
Details of existing ANZ relationship: (<i>if applicable</i>)		
Relationship Manager:		Main Account Number:
Accountant's Contact Details:		

PART – 2 Bank Facility Details

This section covers all the financial aspects of your Practice so we can design a tailored financial solution to meet your needs. When we have all the documentation, we will assess your application. This normally takes around 5-10 working days. Your ANZ Relationship Manager, that specialises in banking for financial planners will contact you during this assessment if we need further information.

2.1 List the new loans required from ANZ

Borrowing Entity/ Individual	Relationship of borrower to the Practice	Loan Term Required	Loan/Limit amount requested	Loan Purpose

2.2 List the existing non-ANZ business loan limit details

(exclude loans to be refinanced by ANZ, but include all other existing non-ANZ business loan/limits that are not required to be refinanced by ANZ)

Loan Purpose	Rate %	Fixed (Yes/No)	Remaining Term	Finance Provider	Loan/Limit Amount

2.3 List the existing non-ANZ personal consumer loans/limits held by a Principal who is also a borrower in this application

(this section is not applicable if the Practice only is applying for credit. Excluding credit cards)

Borrower Name(s)	Rate %	Fixed (Yes/No)	Remaining Term	Finance Provider	Loan/Limit Amount

2.4 Security

List security to support business application including loans that are to be refinanced

Details of Security to be provided	Residential		ANZ Held	
	Yes	No	Yes	No
A. 1st/2nd registered mortgage over property at	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
B. 1st/2nd registered mortgage over property at	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
C. 1st/2nd registered mortgage over property at	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
D. Guarantee and indemnity by director(s) and or applicant(s)/guarantor(s) <i>(provide full names)</i>			<input type="checkbox"/> Yes	<input type="checkbox"/> No
E. Guarantee and indemnity by director(s) and or applicant(s)/guarantor(s) <i>(provide full names)</i>			<input type="checkbox"/> Yes	<input type="checkbox"/> No
F. Guarantee and indemnity by director(s) and or applicant(s)/guarantor(s) <i>(provide full names)</i>			<input type="checkbox"/> Yes	<input type="checkbox"/> No
G. Guarantee and indemnity by associated company/trustee			<input type="checkbox"/> Yes	<input type="checkbox"/> No
H. Guarantee and indemnity by associated company/trustee			<input type="checkbox"/> Yes	<input type="checkbox"/> No
I. Guarantee and indemnity by associated company/trustee			<input type="checkbox"/> Yes	<input type="checkbox"/> No
J. 1st registered mortgage debenture/goods mortgage over			<input type="checkbox"/> Yes	<input type="checkbox"/> No
K. 1st registered mortgage debenture/goods mortgage over			<input type="checkbox"/> Yes	<input type="checkbox"/> No
L. 1st registered mortgage debenture/goods mortgage over			<input type="checkbox"/> Yes	<input type="checkbox"/> No
M. Other – please specify			<input type="checkbox"/> Yes	<input type="checkbox"/> No
N. Other – please specify			<input type="checkbox"/> Yes	<input type="checkbox"/> No
O. Other – please specify			<input type="checkbox"/> Yes	<input type="checkbox"/> No

*If necessary, attach details of security property

List security held by other finance providers

Details of Security	Estimated Value	Valuation held <i>(year)</i>	Security held by <i>(name)</i>

PART – 3 *Specific Business Details*

This section provides information on your business' history as well as products and services the Practice offers. This information also includes staffing, principal and key advisor details and breakdown of recurring and one off income. This information helps your ANZ Relationship Manager understand your business.

AFS licence holder name and number*

List associated entities of the AFS Licence Holder/Authorised Representative

**Authorised representatives must provide details of their own licence and of their licensee*

3.1 Product and Services

Details of financial planning products/services offered by the Practice

Details of products/services offered by the business that are not related to financial planning services
(e.g. finance broking, accounting, etc)

What % of income do these products/services contribute?

Details of memberships of industry bodies

3.2 Principals and Advisors

Please detail estimated hours per week Principals and Advisors spend on the following activities

Servicing existing customers	
Generating new business	
Administration	
Other	

Does the business have succession plans in place for any of the Principals?

Please provide a brief description

Principal(s) and Key Advisor details*

(Principal and Key Advisor names are not required)

Principal	Age	Years of Experience	% Revenue contribution to total income	% Customers managed
Principal 1				
Principal 2				
Principal 3				
Principal 4				
Principal 5				
Principal 6				
Key Advisor	Age	Years of Experience	% Revenue contribution to total income	% Customers managed
Advisor 1				
Advisor 2				
Advisor 3				
Advisor 4				
Advisor 5				
Advisor 6				

*If borrowing is to acquire another business, complete above section and **Part – 4** for the business to be acquired

*Refer Declaration and Signatures section for personal information collection

3.3 Financial Summary

The following information will complement financial statements provided with this application

(Please complete for the last three financial year periods)

(All figures should be 000's)	Current Financial Year (/20)	Year Two Financial Year (/20)	Year One Financial Year (/20)
Initial fees			
Initial commissions			
Other			
<u>Total One-off income</u>			
Recurring fees			
Recurring commissions			
Other			
<u>Total Recurring income</u>			
Other non-Financial Planning income (e.g. finance broking)			
<u>Total Revenue</u>			
Total salary costs (excluding Principals)			
Total Principal(s) salary			
Total Principal superannuation			
Total depreciation/amortisation			
Total interest expense			
Total Profit Before Tax			

*If borrowing is to acquire another business, complete above section and **Part – 4** for the business to be acquired

3.4 Customer Analysis

How many clients does the Practice have?	
What % of the Practice's clients generates recurring income?	
How many clients were new in the last 12 months?	
Does the Practice have a customer management system? If yes, please list details	

Does the Practice segment its customers (e.g. products, or services)

If yes, please provide the details below*

Segment Name	# of Customers	% of Total revenue	% of Recurring revenue

*If the Practice uses a different form of segmentation, please attach details with this application

Describe the value proposition/strategy in place to service the Practice's customers

e.g. full service with automatic annual review of investment plans, etc

List the top ten customers' income generation for the most recent financial year*
Customer names are not necessary

Top 10 Customers	Total customer income	% of total Practice income	Years as client	Advisor
Customer 1				
Customer 2				
Customer 3				
Customer 4				
Customer 5				
Customer 6				
Customer 7				
Customer 8				
Customer 9				
Customer 10				

**Refer Declaration and Signatures section for personal information collection*

3.6 Other Information

Does the business have an organisational chart? Current/Proposed <i>(if applicable)</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No
Has the business had any ASIC breaches, inquiries, enforceable undertakings or other directions from ASIC? <i>If so, please provide dates and details in Part 5</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No
Does the business have professional indemnity insurance?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Does the business have death, disability and income protection insurance?	<input type="checkbox"/> Yes <input type="checkbox"/> No
In the case of an AFS license holder, does the business have any Authorised Representatives that are not employees of the business?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are there any Buyer of Last Resort clauses with any platforms, fund managers or dealer groups?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Does the business have an IT plan and MIS infrastructure?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Is there any volume rebate(s) included in the income stream?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do all advisers and employees have employment contracts?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do all advisers and employees have non compete clauses?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Has the asset mix* changed significantly over the past 3 years? <i>If yes, please advise</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No
Has the Practice or its Principals been Authorised Representatives of more than one licensee in the last 5 years? <i>If so, list the licensee(s)</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No
Does the business have any tax liabilities with the ATO? <i>If so, please advise</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No

Definitions

***Asset Mix:** The percentage of an investment fund's assets allocated to major asset classes/customers

3.7 Business History

i.e establishment date, how the business was formed (e.g merger) prior Dealer Groups, previous licences, awards and achievements

PART – 4 Acquiring a Financial Planning Practice

This section provides your ANZ Relationship Manager with information on the Financial Planning Practice you are wanting to purchase.

If you are not acquiring a Financial Planning Practice ignore this section

4.1 If the purpose of this application is to acquire another financial planning practice, will any new entities be formed, purchased If so, please provide details

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4.2 Principal(s) and Key Advisor details of Practice to be acquired (Principal and Key Advisor names are not required)

Principal	Age	Years of Experience	% Revenue contribution to total revenue	% Customers managed
Principal 1				
Principal 2				
Principal 3				
Principal 4				
Principal 5				
Principal 6				
Key Advisor	Age	Years of Experience	% Revenue contribution to total revenue	% Customers managed
Advisor 1				
Advisor 2				
Advisor 3				
Advisor 4				
Advisor 5				
Advisor 6				
Advisor 7				
Advisor 8				

4.3 Financial Summary

Please complete for the last three financial year periods

Provide details of the Practice to be acquired

(All figures should be 000's)	Current Financial Year (/20)	Year Two Financial Year (/20)	Year One Financial Year (/20)
Initial fees			
Initial commissions			
Other			
<u>Total One-off income</u>			
Recurring fees			
Recurring commissions			
Other			
<u>Total Recurring income</u>			
Other non-Financial Planning income (<i>e.g. finance broking</i>)			
<u>Total Revenue</u>			
Total salary costs excluding Principal(s)			
Total Principal(s) salary			
Total Principal superannuation			
Total depreciation/amortisation			
Total Interest expense			
Total Profit Before Tax			

PART – 5 Provision of Documents Checklist

Provision of Documents Checklist relates to the information which will accompany the ANZ Financial Planning Borrower's Application Form. Your ANZ Relationship Manager will need copies of the below information (where applicable).

5.1 Primary Documents

Please attach the following documents to support your application

Attached

Copy of financial statements for the last three years <i>(Audited financial statements if AFS Licence Holder)</i>	<input type="checkbox"/>
Copy of the organisational chart. Current/Proposed <i>(if applicable)</i> <i>Please include all related entities and individuals</i>	<input type="checkbox"/>
Copy of professional indemnity insurance certificate of currency	<input type="checkbox"/>
Copy of death, disability and income protection insurance certificate of currency	<input type="checkbox"/>

5.2 Auxiliary Documents

Please attach the following documents to support this application
Some documents may not be applicable to the borrower/applicant

Attached

Member Firm Agreements/Service Agreements	<input type="checkbox"/>
Branch Agreements	<input type="checkbox"/>
Franchise Agreements	<input type="checkbox"/>
Authorised Representative (AR) Agreements	<input type="checkbox"/>
Advisor Deeds and/or sub AR Agreements	<input type="checkbox"/>
Trust Deeds	<input type="checkbox"/>
Shareholders Agreements	<input type="checkbox"/>
Deeds of Priority	<input type="checkbox"/>
Documented ASIC breaches, enquiries, enforceful undertakings or other directions from ASIC	<input type="checkbox"/>
Other agreements <i>Excluding company constitutions of non AFS Licensee, non AR, and non-advisor corporate trustee borrower in accordance with ANZ internal policy unless otherwise advised</i>	<input type="checkbox"/>

Please be advised, the above information is solicited for a preliminary analysis of your Practice. Additional information about the Practice and/or Principal(s) may be sought for a detailed understanding of your business.

Declaration and Signatures

ANZ's collection, use and disclosure of personal information

ANZ is collecting your personal information to enable it to assess an application for credit and, if it is approved, to provide the product or service applied for. Without this information ANZ may not be able to consider or approve this application. ANZ may disclose your personal information to:

- › any person who introduces you to ANZ;
- › any service provider ANZ engages to carry out or assist its functions and activities;
- › credit reporting agencies;
- › a mortgage insurer or re-insurer;
- › your referee;
- › other persons ANZ is authorised or required by law to disclose information to (and other persons where you have consented to the disclosure).

You may request access to your information at any of our branches. Access will be granted in accordance with the Privacy Act 1988 for a reasonable fee. If any of your information is inaccurate, you may request that it may be corrected.

Sensitive information

The collection of sensitive information is restricted by the Privacy Act. ANZ will not collect information about your ethnicity, political opinions, religious beliefs, sexual preferences or criminal record unless this is necessary to provide your product or service and you have consented to that collection.

By signing below you agree to ANZ doing the following things:

My consent to certain disclosures of personal information

ANZ may give my personal information (including information about my credit worthiness, history, standing or capacity) to:

- › any credit reporting agency;
- › any contractor or service provider ANZ engages to provide services connected with my relationship with ANZ;
- › an intending guarantor, to enable that person to consider whether or not to act as guarantor, or offer property as security, for a loan I or a joint borrower have applied for with ANZ;
- › a person who is guarantor, or has provided property as security, for a loan I have with ANZ;
- › a mortgage insurer or re-insurer of a mortgage insurer;
- › any credit provider for any purpose I have agreed to.

I authorise these people to have access to my personal information from ANZ.

I consent to a trade insurer receiving my personal information from a credit reporting agency where it relates to this application for credit.

ANZ may only give my personal information to another credit provider:

- › to assess my credit application;
- › to assess my credit worthiness;
- › to help me avoid a default on my obligations; or
- › to tell a credit provider of any default I have made.

Application for commercial credit

ANZ may obtain a credit report containing my personal information and use it in assessing this application.

Use of commercial credit information

ANZ may:

- › obtain information about my commercial activities and commercial credit worthiness from any business which provides that type of information; and
- › use that information to assess this credit application.

Banker's Opinion

ANZ may obtain from other banks, and disclose to other banks, a banker's opinion about my consumer credit worthiness for use in the assessment of this application for credit.

Promotion of other products or services

If this application is approved, then until I tell ANZ otherwise:

- › ANZ may use my personal information to help ANZ promote its products or services to those of its related companies and alliance partners;
- › ANZ may also disclose my personal information to its related companies or its alliance partners in connection with that
 - to enable them to decide if they want ANZ to tell me about a product or service;
 - where they have agreed to only use the information for this purpose and where they have agreed to keep the information confidential and return it to ANZ (or destroy it) as soon as it has been used to this purpose.

Where I do not want ANZ to tell me about its product or services or those of its related companies or alliance partners, I may withdraw my consent by calling 13 13 14.

Declaration and Privacy Consents for insurer/re-insurer of ANZ

Because ANZ will or may be seeking lenders mortgage insurance from the insurer/re-insurer listed below (the "insurer"/"re-insurer"), you agree to the insurer/re-insurer doing the following things:

- the insurer/re-insurer may obtain a credit report containing my personal information and use it in assessing ANZ's application for insurance;
- the insurer/re-insurer may also obtain information about my commercial activities and commercial credit worthiness, history, standing or capacity) to any credit reporting agency, any contractor or service provider the insurer/re-insurer engages to provide services connected with the insurer/re-insurer, and any other credit provider.

By signing this application form, you authorise these people to have access to your personal information from the insurer/re-insurer.

The insurer/re-insurer may also receive your personal information from these people. In each case however, your personal information is only to be given or received in connection with ANZ's application for insurance/reinsurance provided.

The insurer as follows:

ANZ Lenders Mortgage Insurance Pty Ltd
ABN 77 008 680 055
Level 2, 530 Collins Street
Melbourne Vic 3000
Enquiries call 13 25 99

The re-insurer as follows:

PMI Mortgage Insurance Ltd
ABN 70 000 511 071
Level 23, 50 Bridge Street
Sydney NSW 2000
Toll-free call 1300 367 764

Declaration and Signature

I acknowledge that all information provided in this application is true and correct, and that the details contained in the Personal Statement of Financial Position are true and correct. I have read and understood this declaration and agree to the matters specified in it.

Signature:

Printed Name:

Position:

Date:

Driver's licence no:

State of Issue:

Date of birth:

Signature:

Printed Name:

Position:

Date:

Driver's licence no:

State of Issue:

Date of birth:

Please forward all completed Financial Planning Borrower's Application Forms and accompanying attachments to:

ANZ Business Banking Industry Specialisation
Level 4, 287 Collins Street
Melbourne Victoria 3000

