



*Think outside the square*

# Fact Find

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*Version 1, August 2014*

Thank you for your recent home loan enquiry.

We understand applying for finance can be a stressful time. We are here to assist you through the process and make it as smooth as possible.

Listed below is a simple guide that outlines the process;

1. We complete this Financial Questionnaire and gather supporting documents
2. Application created, signed and then lodged with lender
3. Conditional Approval by Lender – Loan approved with specific conditions such as bank account statements, employment checks, valuations
4. Unconditional Approval – Loan approved and settlement can be booked
5. Settlement Booked with Solicitors
6. Settlement
7. Post Settlement – Ensure all accounts are setup correctly and you have the appropriate insurances and structures

Thank you for choosing Pagoda Finance.

## Supporting Information

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### INCOME VERIFICATION – PAYG

- ✓ Copies of your **two** most recent pay slips – computerised, showing year to date earnings. The most recent payslip provided must be issued within the last 4 weeks.
- ✓ Group Certificate (PAYG Summary) for the **latest** financial year.
- ✓ **NB:** If you have been employed in your current position for **less than 12 months**, a letter from your employer stating position, start date, employment mode (permanent, casual etc) and including whether or not you are under a probationary period will be required.

### INCOME VERIFICATION – SELF EMPLOYED

- ✓ Copies of the **last 2 years** Financial Statements for the business/partnership.
- ✓ Copies of the **last 2 years** Tax Returns **and** Assessments for the business/partnership.
- ✓ Copies of your **personal** Tax Returns for the **last 2 years**.

### PROPERTY PURCHASE

- ✓ Copy of the first page of the Contract of Sale (unless applying for pre-approval/conditional approval).
- ✓ Copy of Foreign Investment Review Board (FIRB) approval (if applicable).

### EVIDENCE OF SAVINGS / FUNDS TO COMPLETE

- ✓ Copies of any bank statements showing sufficient funds to complete the transaction (i.e. deposit, stamp duty, legal costs etc).
- ✓ If you have less than 20% deposit, you will need to demonstrate “genuine savings” – therefore please provide at least 3 months bank statements.

Please note that if you are using internet statements, lenders require at least one “bank issued statement” (doesn’t matter how old it is) showing your name, address and account number. Internet statements or internet balances will suffice for recent history which must be within the last 2 weeks.

### NON-CITIZENS (Temporary Residents & Permanent Residents)

- ✓ Copy of any temporary visa (e.g. 457) or permanent visa.

### IDENTIFICATION VERIFICATION

- ✓ Copies of identification documents sufficient to complete 100 points for each applicant to the loan. Points as follows:

Passport **(70)**  
Medicare Card **(25)**  
Driver’s Licence **(40)**

Bank Debit or Credit Card **(25)** – only one per bank  
Utilities Bill **(25)** (eg: Electricity/ Tel Account etc)

## Your Details

Information about you

### Personal Details

	Client 1	Client 2
Title (Mr/Mrs/Ms)		
Family Name		
Given Name(s)		
Date of Birth	/ /	/ /
Marital Status		
Dependents and Age		
Residency Status		
Nearest Relative		

### Company/Trust/Super Details

Company Type	
ABN	
ACN	
Where registered?	
Registration Date	

### Contact Details

Home Address		
Time at Current Address		
Living Arrangements	<input type="checkbox"/> Renting <input type="checkbox"/> Own Home <input type="checkbox"/> At Home	<input type="checkbox"/> Renting <input type="checkbox"/> Own Home <input type="checkbox"/> At Home
Postal Address <i>(if different)</i>		
Phone (h)		
Phone (w)		
Mobile		
Email		
Previous address <i>(if less than 3 years)</i>		

## Employment Details

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Information regarding your occupation and working life

	Client 1	Client 2
Work Status <i>(eg fully employed, home duties, retired)</i>		
Occupation		
Employer		
Employer Address		
Probation?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
How long with current employer?	<b>From:</b> <b>To:</b>	<b>From:</b> <b>To:</b>
Previous Employer (if less than 3 years with current)		
Previous Employer Address		
Time with Employer	<b>From:</b> <b>To:</b>	<b>From:</b> <b>To:</b>

## Property Purchase Information

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Information regarding your property purchase

Address

House  
  Unit  
  Land  
  Construction  
 Investment  
  Owner Occupier

Estimated Value

Contact for access

# Income & Expenditure Details

Please provide details of how much money you earn and spend

## Income

### Per annum

	Client 1	Client 2
Gross Base Salary		
Commission		
Bonus		
Car allowance		
Rental Income		
Investment Income		

### TOTAL

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Do you expect this income to change over the next 12 months?

<input type="checkbox"/> Yes <input type="checkbox"/> No

*If yes, please provide details*

<input type="checkbox"/> Yes <input type="checkbox"/> No

*If yes, please provide details*

## Personal Expenses

	Client 1	Client 2
Rental		
Child Support		
Other		
Other		

### TOTAL

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Do you expect your expenses to change over the next 12 months?

<input type="checkbox"/> Yes <input type="checkbox"/> No

*If yes, please provide details*

<input type="checkbox"/> Yes <input type="checkbox"/> No

*If yes, please provide details*

# Assets

## Property Assets

### Property Asset 1 - Address

Suburb
State

House     Unit     Land     Construction

Owner occupied     Investment

**To be used as security?**     Yes     No

**Property Ownership %**     Client 1 % \_\_\_\_\_

(list percentage ownership)     Client 2 % \_\_\_\_\_

Estimated value

#### Contact for access

Contact Name	<input style="width: 95%;" type="text"/>
Contact number	<input style="width: 95%;" type="text"/>
Contact email	<input style="width: 95%;" type="text"/>

### Property Asset 2 - Address

Suburb
State

House     Unit     Land     Construction

Owner occupied     Investment

**To be used as security?**     Yes     No

**Property Ownership %**     Client 1 % \_\_\_\_\_

(list percentage ownership)     Client 2 % \_\_\_\_\_

Estimated value

#### Contact for access

Contact Name	<input style="width: 95%;" type="text"/>
Contact number	<input style="width: 95%;" type="text"/>
Contact email	<input style="width: 95%;" type="text"/>

### Cheque, savings, term deposit and other accounts

Name of Institution <i>e.g. name of bank, building society, etc</i>	Account Type <i>e.g. cheque, savings, etc</i>	Owner(s) or percentage of ownership if not 50/50		Current Balance
		<input type="checkbox"/> Client 1	% _____	\$
		<input type="checkbox"/> Client 2	% _____	
		<input type="checkbox"/> Client 1	% _____	\$
		<input type="checkbox"/> Client 2	% _____	
		<input type="checkbox"/> Client 1	% _____	\$
		<input type="checkbox"/> Client 2	% _____	
<b>Subtotal</b>				\$

<b>Investments (superannuation, managed funds, shares, unit trusts):</b>				
Name of Institution <i>e.g. name of bank, portfolio</i>	Investment Type <i>e.g. super, shares, managed funds</i>	Owner(s) or percentage of ownership if not 50/50		Current Value
		<input type="checkbox"/> Client 1	% _____	\$
		<input type="checkbox"/> Client 2	% _____	\$
		<input type="checkbox"/> Client 1	% _____	\$
		<input type="checkbox"/> Client 2	% _____	\$
		<input type="checkbox"/> Client 1	% _____	\$
		<input type="checkbox"/> Client 2	% _____	\$
<b>Subtotal</b>				\$

<b>Motor Vehicles</b>				
Make and Model	Year Build	Owner(s) or percentage of ownership if not 50/50		Market Value
		<input type="checkbox"/> Client 1	% _____	\$
		<input type="checkbox"/> Client 2	% _____	\$
		<input type="checkbox"/> Client 1	% _____	\$
		<input type="checkbox"/> Client 2	% _____	\$
<b>Subtotal</b>				\$

<b>Other assets (household items and personal effects, cash, boats, tools of trade)</b>				
Brief description of assets <i>Do not provide a detailed list of assets</i>	Owner(s) or percentage of ownership if not 50/50		Market Value	
	<input type="checkbox"/> Client 1	% _____	\$	
	<input type="checkbox"/> Client 2	% _____	\$	
	<input type="checkbox"/> Client 1	% _____	\$	
	<input type="checkbox"/> Client 2	% _____	\$	
	<input type="checkbox"/> Client 1	% _____	\$	
	<input type="checkbox"/> Client 2	% _____	\$	
<b>Subtotal</b>				\$

## Liabilities

<b>Housing loans, overdrafts and other loans</b> (including business company loans)					
Address of security property	Name of Lender and account number	Minimum monthly repayment	Borrower	Amount owing or LOC limit	Refinance or consolidating this loan / debt
Property 1		\$	<input type="checkbox"/> Client 1 <input type="checkbox"/> Client 2	\$	<input type="checkbox"/> Y <input type="checkbox"/> N
Property 2		\$	<input type="checkbox"/> Client 1 <input type="checkbox"/> Client 2	\$	<input type="checkbox"/> Y <input type="checkbox"/> N
Property 3		\$	<input type="checkbox"/> Client 1 <input type="checkbox"/> Client 2	\$	<input type="checkbox"/> Y <input type="checkbox"/> N

<b>Credit cards, store cards, unsecured overdrafts</b>						
(Include details of credit cards, store cards, etc even if you have a nil balance)						
Name of Lender <i>e.g. name of bank, store, etc</i>	Credit Type <i>e.g. MasterCard, Visa, etc</i>	Credit Limit	Minimum monthly repayment	Borrower	Amount owing (balance)	Refinance or consolidating this debt
			\$	<input type="checkbox"/> Client 1 <input type="checkbox"/> Client 2	\$	<input type="checkbox"/> Y <input type="checkbox"/> N
			\$	<input type="checkbox"/> Client 1 <input type="checkbox"/> Client 2	\$	<input type="checkbox"/> Y <input type="checkbox"/> N
			\$	<input type="checkbox"/> Client 1 <input type="checkbox"/> Client 2	\$	<input type="checkbox"/> Y <input type="checkbox"/> N

<b>Other loans, including personal loans, vehicle leases, hire purchase</b>						
Name of Lender <i>e.g. name of bank, store, etc</i>	Credit Type <i>e.g. MasterCard, Visa, etc</i>	Minimum monthly repayment	Borrower	Amount owing	Refinance or consolidating this loan / debt	
		\$	<input type="checkbox"/> Client 1 <input type="checkbox"/> Client 2	\$	<input type="checkbox"/> Y <input type="checkbox"/> N	
		\$	<input type="checkbox"/> Client 1 <input type="checkbox"/> Client 2	\$	<input type="checkbox"/> Y <input type="checkbox"/> N	
		\$	<input type="checkbox"/> Client 1 <input type="checkbox"/> Client 2	\$	<input type="checkbox"/> Y <input type="checkbox"/> N	

<b>Other liabilities, including provisional taxation, HECS, guarantees on loans/leases</b>				
Brief description of other liabilities	Minimum monthly repayment	Debtor / Guarantor	Amount owing	Refinance or consolidating this loan / debt
	\$	<input type="checkbox"/> Client 1 <input type="checkbox"/> Client 2	\$	<input type="checkbox"/> Y <input type="checkbox"/> N



## Insurance Details

Please provide details where you can regarding existing policies – we will fill the rest out with you during the appointment

### Life Cover/TPD/Income Protection/Trauma

Owner	Company	Benefit Amount	Waiting Period	Benefit Period	Annual Premium	Super (Y/N)
<input type="checkbox"/> Client 1 <input type="checkbox"/> Client 2						
<input type="checkbox"/> Client 1 <input type="checkbox"/> Client 2						
<input type="checkbox"/> Client 1 <input type="checkbox"/> Client 2						
<input type="checkbox"/> Client 1 <input type="checkbox"/> Client 2						

### General Insurances

Do you have any of the following insurances?

	Client 1	Client 2
Private Health?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Home & Contents?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Landlord?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

## General Considerations

<b>List any significant financial / credit history that has impacted on the applicants</b>	
Has there been any financial stress or applications for hardship from any existing loans debt?	
Have there been any defaults on any loans or debts in the last 2 years?	
Is there a record of genuine savings in the last 12 months?	
<b>Addresses any significant changes to financial circumstances that are reasonably foreseeable</b>	
Significant changes in future – family / relationship	
Temporary changes in income or employment	
Geographical factors that will impact on expenses	
Anticipated large expenditure	
<b>How will these changes be overcome?</b>	

**Client 1:**

Name: \_\_\_\_\_

Signature: \_\_\_\_\_.

**Client 2:**

Name: \_\_\_\_\_

Signature: \_\_\_\_\_.