

Title

Given Name

## PERSONAL DETAILS FORM

Preferred Name

CERTIFIED	now did you near about us
Create Build Protect Finance	

Surname

Middle Name

ivairie.							
	Date of Birth	Gend	ler		N	J∟ Marital Status	
	/ /	 Mobile	Male Fe	emale (	Other _	Single	Partner
Phone:				Tax File	Number:		
Email Address:							
Employment Status	Full-Time	Part-Time/Casual	Self-Employe	ed S <sup>.</sup>	tudent	Unemployed	
Occup/Employer:	Occupation		mployer		An	inual Salary	
Citizenship Status:	Australian Citizen	Permanent Resider	nt Resident	Visa			
Home Status:	Own	Mortgage	Renting		Saving	Boardin	ıg
Health Insurance:	Basic	Extras Provider			None		
Number/Street:	Primary Street Address		Pr	rimary Postal Ad	dress		
			DO D				
City/Suburb:			PO Box:				
State: Postcode:							
	Tick this box if stree is the same as posta						
Invest. Property:	Yes	No	I am looking to invest in Property				
Other Investments:	Yes	No	I am interested in building my investments				
Personal Insurance	Life	TPD	Income Protection Critical Illness		Critical Illness		to review my
HECS/HELP Debt	Yes	No	Not Sure				
Superannuation:	Single Fund	Multiple Funds	I want my to review my superannuation		I	have a SMSF	
Will / POA	Will & Power of Attorney	Will Only	Last Reviewed [	Date/		No w	ill or POA
Debts	I want to consolida	ate my debts	I need help managing my debt to pay off more quickly		I want information on borrowing money		
Cash Flow	I have a budget & si	urplus income	I have a budge	t but no savings		I do not have	a budget
Cash Flow	I want to understar invest surplus		I need help ma	naging my mone	<b>У</b>	I want to unde spending & d	
Retirement	I am currently	retired	I will retire in t	the next 5 years		I will retire in the I	next 10 years
	I want to know how I can maximise my retirement income		I want to understand how retirement looks for me			I want help planning for my retirement	
Tax Planning		t to know how I can  I have a tax problem I need to need to sort out			I want someone to help me with tax planning		

## **CLIENT DECLARATION**

You have indicated that you are interested in obtaining information on financial advice and/or services relating to your personal financial affairs. CBP Finance Pty. Ltd. will refer your details to our professional partners that can provide you with this support.

If you elect to proceed with the referral your relevant personal information may be transferred to our professional partners who will assume immediate responsibility for its maintenance and security. You are entitled to request reasonable access to the information the professional partners holds about you. In addition, you may wish to consider requesting a copy of their privacy policy to understand how your personal information will be managed.

Authorise CBP FINANCE PTY LTD to transfer any relevant personal information to the referred professionals

Do not authorise CBP FINANCE PTY LTD to transfer any relevant personal information to the referred professionals

I would like to be added to CBP FINANCE PTY LTD mailing list

Please sign here:	Date://

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