



Chartered Accountants

Goldings CA Pty Ltd  
ABN 47 086 335 015  
Business Advisors

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# Client Questionnaire for New Clients

## Personal Information

### Your Details

	Client 1	Client 2
Title	_____	_____
Surname	_____	_____
Given Names	_____	_____
Preferred Name	_____	_____
Date of Birth	____/____/____	____/____/____
Sex	Male / Female	Male / Female
Marital Status/Relationship	_____	_____
Employment Status	Full Time / Part Time / Casual / Retired / Home Maker / Unemployed	Full Time / Part Time / Casual / Retired / Home Maker / Unemployed
Occupation	_____	_____
Employer	_____	_____
Tax File Number	_____	_____

# CLIENT QUESTIONNAIRE FOR NEW CLIENTS

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## Your Contact Details

	Client 1	Client 2
Residential Address	_____	_____
Postal Address (if applicable)	_____	_____
Home Phone	_____	_____
Home Fax	_____	_____
Home Email	_____	_____
Mobile	_____	_____
Business Phone	_____	_____
Business Fax	_____	_____
Business E-mail	_____	_____
Preferred Contact	Home / Work / Mobile / E-mail	Home / Work / Mobile / E-mail

## Your Dependants

(e.g. Parents, Children)

Name	Relationship	Date of Birth
_____	_____	/ /
_____	_____	/ /
_____	_____	/ /
_____	_____	/ /

# CLIENT QUESTIONNAIRE FOR NEW CLIENTS

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## Some General Questions

How did you come to hear about Goldings CA?

Do you have a Family Trust or any other Trust in place?

If so, please bring with you the Trust Deeds if you have them and copies of latest financial statements and tax returns.

Do you have a company?

If so please bring with you the Statutory records, if you have them, and copies of latest Financial Statements and Tax Returns.

Do you have a Self-Managed Superannuation Fund?

If so please bring with you the Trust Deeds if you have them and copies of latest Financial Statements and Tax Returns.

Are there any organisations to which you regularly give money or support?

Are you aware of the range of services that we can offer to you?

In what areas are you currently seeking our assistance?

**Often we work together with your other professional advisors. It may be helpful for us to have their contact details.**

Do you currently have a solicitor who acts for you? If so would you please give us their name and contact details?

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Do you have a current Will, which is up-to-date and reflects your current wishes?

Are you confident that this Will has considered all the relevant issues?

Have you executed an Enduring Power of Attorney to someone who will be able to deal with your legal matters if you are unable to do so?

Have you considered giving someone the power to deal with medical decisions on your behalf if they arise?

Do you have an insurance broker? If so would you please give us their name and contact details?

Do you have a Financial Planner? If so would you please give us their name and contact details?

Are you confident that all areas of risk including for example public liability, professional indemnity, workers compensation, income protection, accident protection, trauma, product liability, plant & equipment etc are all adequately covered at competitive premiums?

Are you confident that you are accumulating sufficient assets for retirement?

Do you require advice on the taxation implications of negative gearing, superannuation or any other matters?

**The information in the following section need not be completed prior to interview unless you wish to do so. The information may or may not be relevant depending on the advice that you require from us. If it is relevant we will discuss these matters further with you at interview.**

# CLIENT QUESTIONNAIRE FOR NEW CLIENTS

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## A Summary of your Assets and Liabilities

The following information will provide a snapshot of your current net worth position.

	Owner	Amount	Comments
<b>Assets</b>			
Principal Home	_____	\$ _____	_____
Home Contents	_____	\$ _____	_____
Non-income Producing Real Estate	_____	\$ _____	_____
Motor Vehicles	_____	\$ _____	_____
Boat/Marine Equipment	_____	\$ _____	_____
Caravan	_____	\$ _____	_____
Collectables/Art or Other Valuables	_____	\$ _____	_____
Own Business	_____	\$ _____	_____
Investments (eg Shares / Managed Funds / Cash)	_____	\$ _____	_____
Investment Property	_____	\$ _____	_____
Personal Superannuation	_____	\$ _____	_____
Company Superannuation	_____	\$ _____	_____
Bank Account(s)	_____	\$ _____	_____
Other	_____	\$ _____	_____
<b>Total Assets</b>		<b>\$ _____</b>	
<b>Liabilities</b>			
Home Loan	_____	\$ _____	_____
Motor Vehicles Loan	_____	\$ _____	_____
Personal Loan	_____	\$ _____	_____
Credit Cards	_____	\$ _____	_____
Investment Loan	_____	\$ _____	_____
Other	_____	\$ _____	_____
<b>Total Liabilities</b>		<b>\$ _____</b>	
<b>Total Net Worth</b>		<b>\$ _____</b>	