

COMBINED MORTGAGE AND PROTECTION FACT FIND



The Financial Service and Markets Act 2000

Financial Advisers are required to have proper regard for a client's best interests in any advice given. Iconic Investments must therefore do their utmost to ensure that they are aware of your personal and financial circumstances so that their advice is the most suitable for your needs. The questions here have been specifically designed to help Iconic Investments provide advice that meets your needs. If, for any reason, you decline to answer any or all of the questions or if you fail to provide true and accurate information to the best of your knowledge, the advice given subsequently may not be best advice, as it can only be based on the information provided.

	First Client	Second Client
Name(s):		
Address:		
Postcode:		
Email address:		
Tel No:		
Mobile No:		
Work No:		
Adviser:		
Date of fact find:		

To ensure that suitable advice is provided and recommendations are based on your current financial circumstances it is important that questions are answered as fully and accurately as possible.

Client Details:

	FIRST CLIENT	SECOND CLIENT
Title		
Surname		
First Name		
Previous Surname (if applicable)		
Date of Birth	/ /	/ /
Age		
Smoker	Y / N	Y / N
Relationship to other client	Spouse / Engaged / Partner Other _____	Spouse / Engaged / Partner Other _____
Dependants	Y / N Ages:	Y / N Ages
Current Residential Status	Owner / Tenant / LWP / Other	Owner / Tenant / LWP / Other
If renting, amount of rent paid	£ per week / month	£ per week / month
Are you on the electoral role at your current address	Y / N	Y / N
Length of time at current address	Yrs Mths	Yrs Mths
Previous Address (if less than 3 years, continue in notes section if more than one)		
Postcode		

Occupation

Current employer		
Occupation / Job title		
Employment status	<ul style="list-style-type: none"> • Employed • Self-employed • Retired 	<ul style="list-style-type: none"> • Employed • Self-employed • Retired
If "other" give details	Other _____	Other _____
If employed, on what basis?	<ul style="list-style-type: none"> • Permanent • Temporary • Contract 	<ul style="list-style-type: none"> • Permanent • Temporary • Contract
Time in current employment	Yrs Mths	Yrs Mths
Details of probationary period	Yrs Mths	Yrs Mths
If contract, specify term of contract	Yrs Mths	Yrs Mths
Previous employer if less than 2 years, to include dates of employment (continue in additional notes section if more than one employer)		
Anticipated retirement age		

Income - Employed Clients

Basic annual income	£	£
Guaranteed overtime	£	£
Guaranteed bonuses	£	£
Non-guaranteed overtime	£	£
Non-guaranteed bonuses	£	£
Total gross income	£	£
Total net income	£	£

Income - Self-employed Clients

Number of years in business	Yrs	Mths	Yrs	Mths
Net profit last year	£		£	
Net profit previous year	£		£	
Net profit year before that	£		£	
Are accounts available	Y / N		Y / N	

Other Income

Car allowance	£		£	
Investment income	£		£	
Rental income	£		£	
Pension	£		£	
State benefits (guaranteed)	£		£	
State benefits (reviewable)	£		£	
Maintenance Payments	£		£	
Other _____	£		£	
Total other income	£		£	

Self-cert

Self-certify income	Y / N		Y / N	
Self-cert figure	£		£	
If employed, provide the principal reason for self-certifying income				

Existing Credit

Client 1, 2 or joint	Type of finance	Finance provider	Balance o/s	Months o/s	Monthly payment	Purpose of credit	Secured	Repay with Mortgage
			£		£		Y / N	Y / N
			£		£		Y / N	Y / N
			£		£		Y / N	Y / N
			£		£		Y / N	Y / N
			£		£		Y / N	Y / N
			£		£		Y / N	Y / N
			£		£		Y / N	Y / N

Credit History

	FIRST CLIENT	SECOND CLIENT
Have you ever had a mortgage or loan application refused?	Y / N	Y / N
Have you ever had a judgement for debt or loan default registered against you?	Y / N	Y / N
Have you ever been declared bankrupt?	Y / N	Y / N
Have you ever failed to keep up repayments under any previous or current mortgage?	Y / N	Y / N
Have you ever failed to keep up repayments under any previous or current rental or loan agreement?	Y / N	Y / N
If yes to any of the above, provide full details:		

Assessment of Affordability

EXPENDITURE	AMOUNT
Bills (gas, electric, telephone, water, council tax, etc)	£
Food	£
Transport	£
Savings & investments	£
Maintenance payments	£
School fees	£
Existing credit outgoings (see previous section)	£
Ongoing mortgage payments (eg. buy to lets)	£
Other	£
Total monthly expenditure	£
Net monthly income (from income section)	£
Net monthly disposable income	£

Assets

	FIRST CLIENT	SECOND CLIENT
House	£	£
Any other assets*	£	£
Total assets	£	£

* details of other assets

Current Mortgages

	FIRST MORTGAGE	SECOND MORTGAGE
Amount outstanding	£	£
Term outstanding	Yrs mths	yrs mths
Repayment type (if interest only, state repayment method)		
Lender		
Current monthly payment and interest rate	£ %	£ %
Interest rate type		
End date for interest rate type	/ /	/ /
Are there any early repayment charges payable	Y / N	Y / N
If early repayment charges are payable, state figure	£	£
Are you prepared to pay the early repayment charges	Y / N	Y / N
Is the current mortgage portable to a new property	Y / N	Y / N
If the current property is being sold, what is the sale price	£	£
Is the current mortgage repaid in the event of death	Y / N	Y / N
Is the current mortgage repaid in the event of critical illness	Y / N	Y / N
Is the current mortgage payment covered in the event of accident, sickness or redundancy	Y / N	Y / N
Is buildings & contents insurance in place	Y / N	Y / N

New Mortgages

Category of client	Home owner / first time buyer/ BtL	Home owner / first time buyer/ BtL
Reason for mortgage	Purchase / remortgage / debt consolidation capital raising / shared ownership / right to buy	Purchase / remortgage / debt consolidation capital raising / shared ownership / right to buy
Address of property to be mortgaged		
Postcode		
Is this your primary residence? If no, provide full details		
Price of property being purchased		
How much do you wish to borrow		
Amount of deposit		
Source of deposit		
Is the vendor / builder paying the deposit		
Do you wish to add any other outstanding debts to the amount		
Preferred mortgage term and reason		
Are funds available to pay fees in connection with mortgage		
Are any home improvements planned If yes, provide details and approximate cost		
If home improvements are not planned, confirm the reason for capital raising		

Property to be Mortgaged (please print out page if more than one property)

House type	Detached / semi-detached / terraced
Property Tenure	Freehold / Leasehold
If leasehold, how long is left on the lease	yrs
Property Type	House / bungalow / flat/apartment / other
Number of bedrooms	
Floors in the building	
Year property was built	
Has the property been extended	Y / N
Is the property of a non-standard construction (ie. thatched roof, barn conversion etc)	Y / N

Shared Ownership

What is the percentage to be purchased	%
Details of shared ownership body you are buying from	

Attitude to Mortgage

You prefer to accumulate savings to repay your mortgage when it is due. You understand there is a risk that your savings may not be sufficient to do so.	
You prefer to have the certainty that your mortgage loan is repaid at the end of the term. This means contracting a repayment mortgage that is designed to use each monthly payment to pay interest and pay back part of the capital outstanding. If you keep up your payments your entire loan will be repaid in full at the end of the mortgage term.	
You are not concerned with repaying the mortgage as you intend to sell the property before the end of the mortgage term and will clear the outstanding mortgage from the sale proceeds.	

Key Information About The Type Of Mortgage Applicable To You

In order to give you a high standard of service, we need to understand your requirements, attitudes and objectives to help us to provide you with a mortgage fitting your needs and relevant to your circumstances. State a reason where you answer 'Yes'.

1. Might your income or expenditure change significantly within the foreseeable future?	
a. Income	Y / N
Approximate timescale / Amount / Reason:	
b. Expenditure	Y / N
Approximate timescale / Amount / Reason:	
2. Do you have any plans to pay off some or all of the mortgage in the foreseeable future?	
Y / N	Approximate Amount £
Approximate timescale / Amount / Reason:	
3. Are you likely to move home within the foreseeable future (other than this transaction)?	
Y / N	Larger / Smaller
Approximate timescale / Amount / Reason:	
4. Mortgage Requirements	
a. An upper limit on your mortgage costs for a specific period	Y / N
Reason and for how long:	
b. To fix your mortgage costs for a specific period	Y / N
Reason and for how long:	
c. A rate linked to the Bank of England base rate	Y / N
Reason and for how long:	
d. A discount on your mortgage repayments in the early years	Y / N
Reason and for how long:	
e. Access to an initial cash sum (known as a cashback)	Y / N
Reason	

5. Which of the following are important to you	
a. No early repayment charge on your mortgage at any point	Y / N
b. No early repayment charge overhang after selected rate ends	Y / N
c. No high lending charge	Y / N
d. Speed of mortgage completion	Y / N
e. Ability to add fees to the loan	Y / N
f. Ability to take repayment holidays	Y / N
g. Ability to make underpayments or overpayments	Y / N
h. Free legal fees	Y / N
i. No valuation fee	Y / N
j. Have valuations fees refunded	Y / N

Recommendation (Adviser only)

Lender Selected		
Product Details		
Reason for the recommendation		
Date Selected		
Research Conducted (retained on file)	PC based system	Paper based system
	Lender contacts	

PROTECTION NEEDS

Lump Sum Needs How big a lump sum would your clients or their family need?

If your clients were to die, their family may wish to pay off debts such as mortgage or car loans. There will be funeral expenses to pay for or they may wish to leave some rainy day money for their family. Their lifestyle may also need to alter and they may need to consider paying off debts. What might some of this cost?

Reason for Lump sum	Client 1		Client 2	Joint
Pay off mortgage	£		£	£
Pay off other loans	£		£	£
Funeral expenses	£		£	£
Other	£		£	£
House move	£		£	£
Other (please enter)	£		£	£
Total (A)	£		£	£

Income Needs – What income would your client or their family need?

Your clients may have other commitments, for example school or university fees, child care or maintenance payments. Remember that if they have planned to pay off their debts then they will not have to make interest payments.

Income Needs	Client 1		Client 2	Joint
Replace lost annual income	£		£	£
Other	£		£	£
Total	£		£	£
Lump sum to generate income (B)	£		£	£
Income calculator – assuming 5% interest (example)				
Required annual income	£18,000			
Lump sum to provide	$\frac{£18,000 \times 100}{5} = £360,000$ (5% interest)			

Existing Arrangements – What other lump sums could your clients get?

Your clients may have existing insurance policies, particularly covering their mortgage. Their employers may provide them with a death-in-service or other benefits. They may want to use up existing investments to reduce the amount of protection they need.

	Client 1		Client 2		Joint
Existing Arrangements	£		£		£
Mortgage Policies	£		£		£
Other Insurance	£		£		£
Employer Benefits	£		£		£
Available Investments	£		£		£
Total (C)	£		£		£
Total Sum Assured Required	Client 1		Client 2		Joint
For lump sum and income generation (A) + (B) – (C)	£		£		£

NOTES;

CRITICAL ILLNESS

If your client(s) were to suffer a critical illness, they may be unable to work and yet still be faced with ongoing commitments such as a mortgage or loans. Their lifestyles may change and they may need to pay off debts, have alterations made to the house or even move to another property. What might some of these issues cost?

Current Monthly Expenditure Analysis

	CLIENT 1	CLIENT 2	JOINT
REASON FOR LUMP SUM			
Pay off Mortgage			
Years Income			
Pay off loans/Credit Cards etc			
Other Client Needs E.g. Childs education/ Further education			
TOTAL			
LESS EXISTING COVER			
SHORTFALL			

INCOME PROTECTION

	CLIENT 1	CLIENT 2
If you were unable to work due to sickness or accident, how much income would you require (A) To maintain your standard of living?		
If you were unable to work for any length of time, what source of income would you have?		
Personal IPP	<input type="checkbox"/>	<input type="checkbox"/>
ASU	<input type="checkbox"/>	<input type="checkbox"/>
Cash	<input type="checkbox"/>	<input type="checkbox"/>
Co Sick pay	<input type="checkbox"/>	<input type="checkbox"/>
State Benefits	<input type="checkbox"/>	<input type="checkbox"/>

Details of existing Private Arrangements

	Client 1			Client 2		
Type						
Provider						
Date Started						
Term/Age						
Deferment period						
Premium	£	£	£	£	£	£
Benefit	£	£	£	£	£	£

Period (weeks)	0-13	14 - 26	26- 39	40- 52	52+		0-13	14-26	26- 39	40- 52	52+
Private £											
Employer £											
State Benefit £											
Total (B) £											
Shortfall A -B £											

NOTES

FAMILY INCOME BENEFIT

	CLIENT 1	CLIENT 2
Current Salary/Income (net) Monthly Net Relevant Earnings Self Employed		
Monthly Income Required to Protect Family in the Event of Death (see current expenditure analysis below)		
Period of Cover or to age		

Current Monthly Expenditure Analysis

	CLIENT 1	CLIENT 2	JOINT
Mortgage/Rent Loans			
Life/Pensions Plans			
General Policies			
Council Tax			
Gas/Electric/Water/Telephone			
TV/Subscriptions			
Travel Expenses			
Social expenses			
TOTAL			

PRIVATE MEDICAL INSURANCE

	CLIENT 1	CLIENT 2
Do you have any private medical insurance (PMI)?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
If so, what is the name of the insurer		
Do you pay for this yourself or is it paid for by your employer?	Self <input type="checkbox"/> Employer <input type="checkbox"/>	Self <input type="checkbox"/> Employer <input type="checkbox"/>
Details of Existing cover		
Protection whilst abroad?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
If frequent foreign travel are there any NHS reciprocal arrangements?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Do you have any form of hospital income benefit? Amount	Yes <input type="checkbox"/> No <input type="checkbox"/> £	Yes <input type="checkbox"/> No <input type="checkbox"/> £
Any restrictions or exclusions	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Details:		
What is the scale or band of hospital that you pay for?		
Does this scale/band include outpatient treatment?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Cost of current cover	£	£

BUILDINGS AND CONTENTS

Do you have Contents Insurance	Yes/no
If so, what is the name of the insurer	
What is the Sum Assured on your existing cover	
Is this sufficient to cover the current value of you contents.	Yes/no
Is the cover new for old or is this cover required	Yes/no
Is Accidental damage included/required	Yes/no
Any restrictions or exclusions	details
What is your current level of premium	
Do you have Buildings Insurance	Yes/no
What is the current rebuilding costs of your home	
Is Accidental damage included/required	Yes/no
Any restrictions or exclusions	details
What is your current level of premium	

Additional Notes

Data Protection & Declarations

Collection of Data

You agree we may hold and process personal information for the purposes of providing financial services including mortgage advice and connected insurance, including sensitive information about racial or ethnic group, physical or mental health, sexual life, criminal proceedings and offences. We gather information from a variety of sources including other financial institutions, employers, professional advisers and licensed credit reference agencies.

Use of Data

As an Authorised Firm we may provide information to our regulators and their successor. We may also provide information to our auditors, Simply Biz Services Plc.

We may from time to time contact you by post, fax or e-mail with details of products and services which may be of interest to you. If you would prefer not to receive this information please indicate your preference by ticking the box here.

We shall disclose information to relevant authorities where we are required to do so by law. With regard to Money Laundering & Financial Crime, we are legally obliged to verify the identity of our customers and retain these records. We will report suspicious transactions to the National Criminal Intelligence Unit.

We will retain records for a minimum period of 3 years.

Access

You have the right to access information we hold about you. You can request a copy of these records by contacting us. We are entitled to charge a fee for this service of up to £10. If any of the information we hold is incomplete or inaccurate please tell us and we will correct it.

Declarations

I/we confirm that I/we have read the information contained herein and confirm that this information is correct.

I/we give my/our consent that this information may be used for the purpose of arranging a mortgage on my/our behalf.

First Client

Second Client

Signature	Date	Signature	Date
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If you would like us to keep in touch after we have arranged your mortgage and protection we shall need your permission. Please certify your authority for us to contact you with details of mortgages and offers which we believe are likely to be of interest to you by signing the declaration below:

First Client

Second Client

Signature	Date	Signature	Date
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I confirm that the client(s) read and agreed the information recorded before signing the above. I also confirm that I have provided the clients with a copy of my firm's Initial Disclosure Document.

Adviser

Signature	Date
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**Upon completion, please return this document to:
ICONIC investments, 12 Euston Place, Royal Leamington Spa, Warwickshire, CV32 4LR**