

In order that we may advise you regarding your financial planning requirements, it is essential that we obtain from you current and relevant information. Please therefore complete the following details as comprehensively as you are able. Please note that references to 'married' or 'marital status' include those of civil partnership.

If there are sections that do not apply to you please write 'none' in those sections rather than leaving them blank or just putting a line through them. If you choose to omit various sections please write 'not disclosed' across that section, however, you should be aware that our advice will be based on the information provided.

This information will be treated confidentially and will only be used for advising you on your financial affairs and for no other purpose. Where you accept our recommendations, the information will form part of our confidential client computer database and we are a registered user of such information under the Data Protection Act 1998.

## (1) General Information

	Self	Spouse/Partner	Notes
Surname	<input type="text"/>	<input type="text"/>	
First names	<input type="text"/>	<input type="text"/>	
Mr/Mrs/Miss/Ms/Dr/Rev/Other	<input type="text"/>	<input type="text"/>	
Marital status	<input type="text"/>	<input type="text"/>	
Date of birth	<input type="text"/>	<input type="text"/>	
Planned retirement age	<input type="text"/>	<input type="text"/>	
Home address	<input type="text"/>	(If different) <input type="text"/>	
Post code	<input type="text"/>	<input type="text"/>	
Tel number at this address	<input type="text"/>	<input type="text"/>	
Mobile number	<input type="text"/>	<input type="text"/>	
Email at this address	<input type="text"/>	<input type="text"/>	
Other address	Business/Home <input type="text"/>	Business/Home <input type="text"/>	
Post code	<input type="text"/>	<input type="text"/>	
Tel number at this address	<input type="text"/>	<input type="text"/>	
Email at this address	<input type="text"/>	<input type="text"/>	
Other address	Business/Home <input type="text"/>	Business/Home <input type="text"/>	
Post code	<input type="text"/>	<input type="text"/>	
Tel number at this address	<input type="text"/>	<input type="text"/>	
Email at this address	<input type="text"/>	<input type="text"/>	

## (2) Preferred Medium for Correspondence

How would you prefer to receive information from us? Put a cross (X) in more than one box if you are happy to leave the medium up to us.

Self	Email (home) <input type="checkbox"/>	Email (business) <input type="checkbox"/>	Letter (home) <input type="checkbox"/>
Spouse/Partner	Email (home) <input type="checkbox"/>	Email (business) <input type="checkbox"/>	Letter (home) <input type="checkbox"/>



**(5) Assets (approximate values)**

	Self	Spouse/Partner	Joint	Income	Notes
House (main residence)	£	£	£	pa	If owned jointly, is this as joint tenants or tenants in common?
Other property(ies)	£	£	£	pa	
Agricultural property	£	£	£	pa	
Woodland/Forestry	£	£	£	pa	
Contents/Personal items/Cars	£	£	£	pa	
Bank accounts	£	£	£	pa	
Building society accounts	£	£	£	pa	
National savings	£	£	£	pa	
ISAs (Cash)	£	£	£	pa	
ISAs (Stocks & Shares)	£	£	£	pa	
Quoted shares	£	£	£	pa	
Gilts	£	£	£	pa	
Unit trusts and OEICs	£	£	£	pa	
Insurance bonds (UK)	£	£	£	pa	
Insurance bonds (Offshore)	£	£	£	pa	
Portfolio service	£	£	£	pa	
Endowment surrender value	£	£	£	pa	
Life policy surrender value	£	£	£	pa	
Private company shares	£	£	£	pa	
VCT and EIS schemes	£	£	£	pa	
Structured products	£	£	£	pa	
Business assets (sole trader)	£	£	£	pa	
Partnership interest	£	£	£	pa	
Interest under trust	£	£	£	pa	
Anticipated inheritance	£	£	£	pa	
Other assets (describe)	£	£	£	pa	

**(6) Liabilities (approximate values)**

	Self	Partner	Joint	Cost
Mortgage outstanding	£	£	£	pa
How repaid (eg endowment)				
Redemption date				
Commencement date				
Further mortgage o/s	£	£	£	pa
How repaid (eg endowment)				
Redemption date				
Commencement date				
Other loans	£	£	£	pa
Overdraft	£	£	£	
Credit card o/s balances	£	£	£	
Personal guarantees given	£	£	£	
Underwriting member Lloyds				

## (7) Employment/Self Employment

	Self	Partner	Notes
Occupation (or retired)			
Employed or self employed			
Name of company/firm			
Nature of business			
Director/Partner/Principal			
Personal shareholding	%	%	
Approx value of shareholding	£	£	
Business premises owned?			
What are your objectives regarding your occupation or business interests?			

## (8) Income

	Self	Partner
<b>From occupation:</b>		
Salary (Schedule E)	£ pa gross/net	£ pa gross/net
Bonus/fees	£ pa gross/net	£ pa gross/net
Dividends from employment	£ pa gross/net	£ pa gross/net
Self employed (Schedule D)	£ pa gross/net	£ pa gross/net
Please describe any major changes that you anticipate to your income from your occupation		

	Self	Partner
<b>From pensions/benefits:</b>		
State pension received	£ pa gross/net	£ pa gross/net
Other state benefits	£ pa gross/net	£ pa gross/net
Private pension received	£ pa gross/net	£ pa gross/net
Child tax credit	£ pa gross/net	£ pa gross/net
Please describe any major changes that you anticipate to your pension income		

	Self	Partner
<b>From investments:</b>		
Interest income	£ pa gross/net	£ pa gross/net
Dividend income	£ pa gross/net	£ pa gross/net
Other income	£ pa gross/net	£ pa gross/net
Please describe any major changes that you anticipate to your investment income		

## (9) Benefits in Kind

	Self	Partner
Car (scale charge)	£	£
Private medical insurance	£	£
Income protection Insurance	£	£
Share option scheme	£	£
Other	£	£

**(10) Expenditure** (you may prefer simply to provide a total amount of annual expenditure at the bottom of the page)

		Self	Partner	Joint	Notes
<b>House:</b>	Mortgage/Rent	£ <input type="text"/> pa	£ <input type="text"/> pa	£ <input type="text"/> pa	
	Home insurance	£ <input type="text"/> pa	£ <input type="text"/> pa	£ <input type="text"/> pa	
	Community charge	£ <input type="text"/> pa	£ <input type="text"/> pa	£ <input type="text"/> pa	
	Household maintenance	£ <input type="text"/> pa	£ <input type="text"/> pa	£ <input type="text"/> pa	
	Household expenses	£ <input type="text"/> pa	£ <input type="text"/> pa	£ <input type="text"/> pa	
<b>Utilities:</b>	Electricity	£ <input type="text"/> pa	£ <input type="text"/> pa	£ <input type="text"/> pa	
	Gas	£ <input type="text"/> pa	£ <input type="text"/> pa	£ <input type="text"/> pa	
	Water	£ <input type="text"/> pa	£ <input type="text"/> pa	£ <input type="text"/> pa	
	Telephone	£ <input type="text"/> pa	£ <input type="text"/> pa	£ <input type="text"/> pa	
	Oil/Solid fuel	£ <input type="text"/> pa	£ <input type="text"/> pa	£ <input type="text"/> pa	
<b>Housekeeping:</b>	Food	£ <input type="text"/> pa	£ <input type="text"/> pa	£ <input type="text"/> pa	
	General housekeeping	£ <input type="text"/> pa	£ <input type="text"/> pa	£ <input type="text"/> pa	
	Wines and spirits	£ <input type="text"/> pa	£ <input type="text"/> pa	£ <input type="text"/> pa	
	Eating out	£ <input type="text"/> pa	£ <input type="text"/> pa	£ <input type="text"/> pa	
<b>Motor:</b>	Petrol/diesel/oil	£ <input type="text"/> pa	£ <input type="text"/> pa	£ <input type="text"/> pa	
	Annual cost of replacement	£ <input type="text"/> pa	£ <input type="text"/> pa	£ <input type="text"/> pa	
	Servicing	£ <input type="text"/> pa	£ <input type="text"/> pa	£ <input type="text"/> pa	
	Insurance/Road fund licence	£ <input type="text"/> pa	£ <input type="text"/> pa	£ <input type="text"/> pa	
	AA/RAC membership	£ <input type="text"/> pa	£ <input type="text"/> pa	£ <input type="text"/> pa	
<b>Travel/Leisure:</b>	Rail/bus fares	£ <input type="text"/> pa	£ <input type="text"/> pa	£ <input type="text"/> pa	
	Holidays (average)	£ <input type="text"/> pa	£ <input type="text"/> pa	£ <input type="text"/> pa	
	Club subscriptions	£ <input type="text"/> pa	£ <input type="text"/> pa	£ <input type="text"/> pa	
	Entertainment	£ <input type="text"/> pa	£ <input type="text"/> pa	£ <input type="text"/> pa	
	Cigarettes/tobacco	£ <input type="text"/> pa	£ <input type="text"/> pa	£ <input type="text"/> pa	
	Books/magazines/papers	£ <input type="text"/> pa	£ <input type="text"/> pa	£ <input type="text"/> pa	
	Sports/hobbies	£ <input type="text"/> pa	£ <input type="text"/> pa	£ <input type="text"/> pa	
<b>Personal (variable):</b>	Clothing	£ <input type="text"/> pa	£ <input type="text"/> pa	£ <input type="text"/> pa	
	Presents	£ <input type="text"/> pa	£ <input type="text"/> pa	£ <input type="text"/> pa	
	Allowances to children/others	£ <input type="text"/> pa	£ <input type="text"/> pa	£ <input type="text"/> pa	
<b>Personal (fixed):</b>	Education	£ <input type="text"/> pa	£ <input type="text"/> pa	£ <input type="text"/> pa	
	Maintenance/alimony	£ <input type="text"/> pa	£ <input type="text"/> pa	£ <input type="text"/> pa	
	Donations/covenants	£ <input type="text"/> pa	£ <input type="text"/> pa	£ <input type="text"/> pa	
<b>Savings/Personal Insurance:</b>	Regular investments	£ <input type="text"/> pa	£ <input type="text"/> pa	£ <input type="text"/> pa	
	Pension contributions	£ <input type="text"/> pa	£ <input type="text"/> pa	£ <input type="text"/> pa	
	Life and Health Insurance	£ <input type="text"/> pa	£ <input type="text"/> pa	£ <input type="text"/> pa	
<b>TOTAL ANNUAL EXPENDITURE</b>		£ <input type="text"/> pa	£ <input type="text"/> pa	£ <input type="text"/> pa	
Annual amount available for saving		£ <input type="text"/> pa	£ <input type="text"/> pa	£ <input type="text"/> pa	

**(11) Occupational Pension Scheme** (if you can provide a scheme booklet then you only need to answer the first three questions and the last two)

	Self	Partner	Notes
Is a scheme available?			
Are you a member?			
Name of scheme			
Employer's contribution			
Your contribution			
Are benefits based on your contributions or your salary?			
Accrual rate (eg 60ths, 80ths)			
Years in scheme to date			
Scheme retirement age			
Contracted out of state second pension?			
Death in service cover is	times income	times income	
Spouse's pension (in service)			
Spouse's pension (retirement)			
Pension escalation rate			
List names of previous pension schemes transferred into this			
List names of previous occupational schemes where you still have benefits			

**(12) Private Pension Plans** (please provide the most recent annual statement for each plan)

	Self	Spouse/Partner
<b>Insurance Company</b>		
Policy Number		
<b>Insurance Company</b>		
Policy Number		
<b>Insurance Company</b>		
Policy Number		
<b>Insurance Company</b>		
Policy Number		
<b>Insurance Company</b>		
Policy Number		
What are your objectives concerning the level of your pension?		

**(13) Life Assurance Policies** (please provide the most recent annual statement for each plan)

	Self	Partner	Joint	Notes
Insurance Company				
Policy Number				
Insurance Company				
Policy Number				
Insurance Company				
Policy Number				
Insurance Company				
Policy Number				
Insurance Company				
Policy Number				
Insurance Company				
Policy Number				

**(14) Health Insurance Policies** (please provide the most recent annual statement for each plan)

	Self	Partner	Joint
Insurance Company			
Policy Number			
Insurance Company			
Policy Number			
Insurance Company			
Policy Number			

**(15) Taxation**

	Self	Spouse/Partner
Country of residence		
May this change, if so when?		
Country of domicile		
Tax district and reference		
National insurance number		

**(16) Gifts** (chargeable or potentially exempt for inheritance tax)

Date	Nature of Gift	Value	To Whom
		£	
		£	
		£	
		£	
		£	
		£	
		£	

**(17) Interests under Trusts**

Beneficiary	Settlor	Nature	Value	Income	Notes
			£		
			£		
			£		

**(18) Wills (please supply copies if possible)**

	Self	Spouse/Partner
Have you made a Will?		
Briefly indicate main provisions		

**(19) Professional Advisers**

**Accountant**

Post code Telephone Email

**Solicitor**

Post code Telephone Email

**Stockbroker**

Post code Telephone Email

**Other**

Post code Telephone Email

**(20) Education Expenses (current costs per term)**

Child	Secondary costs/term	From Age	To Age	University or College costs/year	From Age	To Age
	£			£		
	£			£		
	£			£		
	£			£		
	£			£		
	£			£		

**(21) Health**

	Self	Partner	Notes
General state of health			
Have you used tobacco products in last 12 months?			
Hazardous activities			

## (22) Risk Assessment Questionnaire (designed by Morningstar)

Please indicate with a cross (X) your answers to the following risk assessment questions. This will help us determine the best asset mix for your investments.

		Self	Partner
<b>Time Horizon</b> Your current situation and future income needs	1 Thinking about the money you are investing now, please tell us when is the earliest date, realistically, when you think you will need access to, or to start drawing income from, your money.		
	Within the next 5 years	<input type="checkbox"/>	<input type="checkbox"/>
	Between 5 and 9 years	<input type="checkbox"/>	<input type="checkbox"/>
	Between 10 and 14 years	<input type="checkbox"/>	<input type="checkbox"/>
	15 years or above	<input type="checkbox"/>	<input type="checkbox"/>
	2 Is it important to you to be able to draw money earlier than anticipated now, if your circumstances change?		
	Important	<input type="checkbox"/>	<input type="checkbox"/>
	Useful but not vital	<input type="checkbox"/>	<input type="checkbox"/>
	Not important at all	<input type="checkbox"/>	<input type="checkbox"/>
<b>Long-Term Goals and Expectations</b> Your views of how an investment should perform over the long term	3 First, tell us which of these sayings most appeals to you.		
	A bird in the hand is worth two in the bush	<input type="checkbox"/>	<input type="checkbox"/>
	Nothing ventured, nothing gained	<input type="checkbox"/>	<input type="checkbox"/>
	Speculate to accumulate!	<input type="checkbox"/>	<input type="checkbox"/>
	4 Now, think about the money you are investing, tell us which of the following statements most appeals to you.		
	I want to aim for the best return possible even if this increases the chances of losing money, especially in the short term, in poor market conditions.	<input type="checkbox"/>	<input type="checkbox"/>
	I want to aim for an above average return, whilst at the same time controlling to some extent the chance of losing money in poor market conditions.	<input type="checkbox"/>	<input type="checkbox"/>
	I want to aim for a good, reasonably stable return whilst accepting that I might benefit from taking more risk if markets perform well.	<input type="checkbox"/>	<input type="checkbox"/>
	I want to aim for a stable, reliable return whilst accepting that I would probably benefit from taking more risk in most market conditions.	<input type="checkbox"/>	<input type="checkbox"/>
	5 Now, think about the following scenario and tell us, instinctively, what you would most likely do: You have won £50,000 in a competition. While this will change your circumstances, you need about £100,000 to really set yourself up financially. You now have the following choices.		
	Take the £50,000	<input type="checkbox"/>	<input type="checkbox"/>
	Risk £10,000 on an 80% chance of increasing your win by another £10,000	<input type="checkbox"/>	<input type="checkbox"/>
	Risk £25,000 on a 66% chance of increasing your win by another £25,000	<input type="checkbox"/>	<input type="checkbox"/>
	Risk £50,000 on a 50% chance of increasing your win by another £50,000	<input type="checkbox"/>	<input type="checkbox"/>
	<b>Short-Term Risk Attitudes</b> Your attitude toward short-term volatility	6 We all know that stock markets go up and down – sometimes dramatically and unpredictably. Please look at the following statements and tell us how you would respond if the value of your investments fell over the next 12 months.	
Even if the value fell by more than half, I wouldn't worry.		<input type="checkbox"/>	<input type="checkbox"/>
I would only start to get concerned if the value fell by around one third (33%)		<input type="checkbox"/>	<input type="checkbox"/>
I would start to worry if the value fell by more than 10%		<input type="checkbox"/>	<input type="checkbox"/>
Any fall by more than a few pounds would worry me.		<input type="checkbox"/>	<input type="checkbox"/>
7 Now, think about the next 3 years and tell us how you feel about what your money might be worth after that time.			
I wouldn't mind even if I had lost money, stock market investment is long term!		<input type="checkbox"/>	<input type="checkbox"/>
I would have some concerns if the value had fallen dramatically, say by more than around 25%.		<input type="checkbox"/>	<input type="checkbox"/>
I wouldn't worry about a small fall in value, say around 10%, over that period.		<input type="checkbox"/>	<input type="checkbox"/>
I would be concerned about any loss in value, however small. I expect a positive return on my money in all circumstances.		<input type="checkbox"/>	<input type="checkbox"/>
8 Now, thinking about your answers to the last two questions, assume for a moment that the value over either period had fallen more than you expected, tell us what your first reaction might be:			
I'd think about investing more – it might be an opportunity!		<input type="checkbox"/>	<input type="checkbox"/>
No real problem; markets are unpredictable.	<input type="checkbox"/>	<input type="checkbox"/>	
I wouldn't be happy. I might live with it for a while but could take action if things didn't improve.	<input type="checkbox"/>	<input type="checkbox"/>	
Sell up! I need to sleep at night!	<input type="checkbox"/>	<input type="checkbox"/>	
<b>Social, Ethical or Environmental</b> This is not part of the Risk Assessment devised by Morningstar, but is included so that we might take these issues into account if appropriate	9 Would you like any social, ethical or environmental issues to be taken into account when looking at your investments?		
	Yes	<input type="checkbox"/>	<input type="checkbox"/>
	No	<input type="checkbox"/>	<input type="checkbox"/>
	I am not sure and would welcome further discussion	<input type="checkbox"/>	<input type="checkbox"/>

**(23) Knowledge and Experience**

In order that we might advise you correctly we need to gauge your investment knowledge and experience.

Please would you consider the main priorities that you have identified under the Objectives section of this Personal Questionnaire, and provide any information that will enable us to gauge your knowledge and experience in the investment fields relevant to the specific type of investments or services that you have listed.

Notes

**(24) Affordability**

It is important to have an emergency fund available at all times so that your investment portfolio is not disturbed unnecessarily by an unforeseen, urgent need for cash. Please identify what accounts or investments you plan to use for your emergency fund and the minimum amount you will attempt to keep in them.

In considering how much you can afford to set aside for your planned increase in regular contributions to an investment, pension or protection plan, do you have any future plans which will put pressure on your ability to continue with such contributions? If so, please give an indication of these.

**(25) Further Information**

If there is further information that you consider to be relevant to a proper assessment of your financial situation please include it here or attach a note to this form.

**(26) Client Declaration - please read carefully**

I confirm that the information I have provided is to the best of my knowledge correct. I have provided this information understanding that it is used to form the basis of any advice and recommendations made to me and that I am not under any obligation to take up any recommendation made.

I understand that the recommendations may be made which involve a regular financial commitment or the investment of capital. Accordingly, I understand that I must be sure of the ability to meet that commitment having given consideration to all other expenditure, and the provision for any emergencies, which may require access to funds.

ADDITIONAL CLIENT DECLARATION (delete if not applicable)

I further declare that I did not want to disclose certain personal/financial information and I am aware that this may prevent an Adviser from being able to identify areas where it might have been appropriate to make recommendations, or which could have an effect on the recommendations that have been made.



	Self	Partner
Signature	<input type="text"/>	<input type="text"/>
Date	<input type="text"/>	<input type="text"/>

**(27) For Office Use Only**

Arch Adviser dealing

Professional Introducer

WHEN COMPLETED, PLEASE RETURN THIS FORM TO:  
Arch Financial Planning Limited, Arch House, The Common, Cranleigh, Surrey GU6 8RZ  
Tel: 01483 204600 Fax: 01483 204611 Email: ifa@arch-fp.co.uk