Personal Details		Clier	nt 1			Clier	nt 2	
Title								
Given name(s)								
Surname								
Preferred name								
Previous name								
Gender		Male	Fema	le	ſ	Male	Fema	le
Date of birth								
Mobile phone								
Home phone								
Work phone								
Email								
Preferred contact method	Email		Mobile		Email		Mobile	
Preferred Contact method	Home		Work		Home		Work	
Current residential address								
	Own Home		Own Hom		Own Home		Own Hom	e -
Housing Status	Renting	With Parents	Mortgage	Other	Renting	With Parents	Mortgage	Other
Date moved in								
Previous residential address								
	Own Home		Own Hom Mortgage		Own Home		Own Hom Mortgage	e –
Housing Status	Renting	With Parents	0-0-	Other	Renting	With Parents	0.0	Other
Date moved in								
Mailing address								
Post Settlement Address								
Haveign Chakes	Own Home		Own Hom Mortgage		Own Home		Own Hom Mortgage	e -
Housing Status	Renting	With Parents		Other	Renting	With Parents		Other

Identification

Country of Residency				
Country of Tax Residence				
Citizenship of				
	Citizen	Non Resident	Citizen	Non Resident
Residential Status	Permane	nt Resident	Perm	anent Resident
Drivers License Number				
Drivers License Name				
Drivers License Expiry Date				
Passport Number				
Passport Name on Document				
Passport Issue Country				
Passport Issue Date				
Passport Expiry				
Family Relations				
Marital status				
Spouse Name				
No. of Dependents				
Name				
Date of birth				
Name				
Date of birth				

Employment Details

	Salaried	Self-employed	Salaried	Self-employed
Employment Type	Retired	Unemployed	Retired	Unemployed
	Student	Home Duties	Student	Home Duties
Employment Status	Primary	Secondary	Primary	Secondary
Francis was not Basis	Full-time	Part-time	Full-time	Part-time
Employment Basis	Casual	Contract	Casual	Contract
Role				
Employer Name				
Employer Contact Person				
Employer Contact Phone				
Employer's address				
Date commenced		′ /		/ /

Previous Employment Details

	Salaried	Self-employed	Salaried	Self-employed
Employment Type	Retired	Unemployed	Retired	Unemployed
	Student	Home Duties	Student	Home Duties
Employment Status	Primary	Secondary	Primary	Secondary
Farada wasant Basis	Full-time	Part-time	Full-time	Part-time
Employment Basis	Casual	Contract	Casual	Contract
Role				
Employer Name				
Employer Contact Person				
Employer Contact Phone				
Employer's address				
Date commenced	/	/	/	/
Date Finished	/	/	/	/

Income (pa)	 _	
Gross salary / wages		
Allowance		
Bonus		
Commission		
Overtime essential		
Overtime non essential		
Other taxable income		
Other taxable income		
Non taxable income		
Non taxable income		
Total income		
Expenses (pa)		
Food & Groceries		
Clothing & Personal Care		
Telephone, Internet & Pay TV		
Recreation & Entertainment		
Education		
Child Care		
Child Maintenance		
Medical & Health		
Sport & Hobbies		
Insurance		
KiwiSaver		
Transport		
Rental Expense		
Household Purchases & Maintenance		
Utilities & Rates		
Other		
Total expenses		

Assets (a)

Please provide a copy of the latest statements for all of your existing financial investments where applicable, including super statements, portfolio reports, or direct equity holdings statements.

Real Estate								
Owner Occupied								
Address		Value		Boarder Income Owne			i p %	То Ве
								Sold
Investment								
Address		Value		Rental In	come	Ownershi	in %	То Ве
Addiess		Value		remai in	come	Ownersin	P 70	Sold
Motor Vehicles					ı			
Make	Model		Year		Value		Ownership	o %
Bank Accounts	T			Malar				- 0/
Bank	Туј	oe 		Value		Ownership %		
Home Contents								
Provider			Value	Ownership	n %			
Trovider			value	Ownersing				
KiwiSaver							<u> </u>	
Description			Value					o %
·				<u> </u>	<u>'</u>			
Superfund								
Fund	Me	mbership Numb	er	Value			Ownership	o %
Shares								
Shares			Value				Ownership	o %
Other								
Description			Value				Ownership	» %

Liabilities (b)

Lender	Linked Asset	Ra	ate Ow	ner	Limit	Balance		nthl	y Re nent Ty	payment pe	Fixe Rate Expi	2	I/O Expiry	Refinance
Credit Card	s													
Lender		Ca	ard Type			Limit			Balance		(Owner	ship	Refinance
Overdraft														
Lender				Li	mit		Balar	nce			Owne	ership		Refinance
Vehicle Loa	ns													
Lender	Ra	ate	Net Amount		Balance	Repaymer	nt	Terr	n	Asset			Ownership	Refinance
Personal Lo	ans													
Lender		Rate	е	Net	Amount	Balance		Re	epayment	Ter	m	0	wnership	Refinance
Student Loa	ans													
Details				В	alance		Repa	yme	ent		Owne	ership		Refinance
Other Loan	s													
Lender		R	ate	Li	imit	Balance	е		Repaym	ent I	xpiry		Ownership	Refinance

Needs & Objectives

Are yo	ou guaranteeing a loan for any o	ther perso	n?			Yes	No
If yes p	please explain:						
Select	t Loan Purpose						
F	Purchase home (owner occupied)		efinance home/personal owner occupied)		Other owner o e.g. home imp	occupied provements, persona	l use)
	Purchase investment property	Re	efinance investment loan		ther investme e.g. future pur	ent chase of property, sh	nares)
	nancing or consolidating debts; pleas (mandatory):	se provide d	etails of the debts that a	re being refinanced or	⁻ consolidated	l and the resulting be	nefit
Prefe	rred Loan Features:						
	Variable Rate	Fixed Rate	!	Multiple Account Spl	its	Additional Repayme	ents
	Redraw	Line of Cre	edit	Offset Account		Loan Variations	
	Portability	Internet B	anking	Тор Up		Switch Loans	
	Rate Lock	Bridging Fi	inance	Fortnightly Repayme	nts	Interest Only	
Your F	inancial Planning						
	Insurance & Asset Protection (protecti the things that matter)	ng	Investment (do I have enough or the place)	right super in	Retirement & retiring st	& Income Streams (plai crategies)	nning
	Estate Planning (strategies for your family's future)		Health & Healthcare (strategies for health, age needs)	ing or medical	Financial Pla (taking full of financial fut	control of your goals &	
	Other						
	(please detail below)						

Insurance

Provider	Policy Number	Value	Premium	Linked Contact(s)	Insurance Renewal Date

Advisers

Adviser Type	Accountant	Solicitor	Real Estate Agent	Financial Advisor
Adviser's name				
Business name				
Email				
Phone				
Linked Contact(s)				
Additional Info	ormation			



Disclosure Statement (Financial Adviser)

Name of financial adviser: Michael Anthony Clinch

Address: 15 First Avenue, Tauranga

P O Box 13083, Tauranga 3141

Trading name: Home Loan Advisers NZ, Astute Financial Management Limited &

First Mortgage Managers Limited

Telephone number: 07 928 6252

Fax Number: N/A

Email address: mike@hlanz.co.nz

This disclosure statement was prepared on: 15th November 2019

It is important that you read this document

This information will help you to choose a financial adviser that best suits your needs. It will also provide some useful information about the financial adviser that you choose.

What sort of adviser am I?

I am a registered, but not authorised, financial adviser.

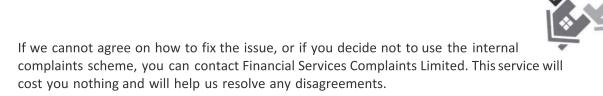
I can give you personalised advice about:

Mortgage products

- Different types of home loans
- (e.g. Fixed rate, variable rate, revolving credit, Low Doc / No Doc etc)
- Bridging loans
- Reverse mortgages
- Construction loans
- Home loan packages offered by various lenders

What should you do if something goes wrong?

If you have a problem, concern, or complaint about any part of my service, please tell me so that I can try to fix the problem. You may contact the internal complaints scheme by contacting Sarah Johnston, CEO, Astute Financial Management Ltd, on 0508 427 822 or 0275124466 or email Sarah.johnston@astutefinancial.co.nz



You can contact Financial Services Complaints Limited at:

Address: Level 4, 101Lambton Quay, Wellington 6011

Telephone number: 0800 347 257

Email address: info@fscl.org.nz

How am I regulated by the Government?

You can check that I am a registered financial adviser at http://www.fspr.govt.nz

The Financial Markets Authority regulates financial advisers. Contact the Financial Markets Authority for more information, including financial tips and warnings.

You can report information or complain about my conduct to the Financial Markets Authority, but in the event of a disagreement, you may choose to first use the dispute resolution procedures described above (under **What should you do if something goes wrong?**).

Declaration

I, Michael Anthony Clinch, declare that, to the best of my knowledge and belief, the information contained in this disclosure statement is true and complete and complies with the disclosure requirements in the Financial Advisers Act 2008 and the Financial Advisers (Disclosure) Regulations 2010.

Signed:	
Date:	15 th November 2019



Client acknowledgement

	<u>*</u>
	acknowledge receipt of the Disclosure Statement version 3 Anthony Clinch trading as Home Loan Advisers NZ, Astute t Mortgage Managers Limited.
Signed	Date
Signed	Date