



APUA
 Suite 101, 16 Hunter Street
 Hornsby NSW 2077
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FINANCIAL PLANNERS ADDENDUM

Attaching to and forming part of the application completed for and on behalf of:

Applicant: _____

Date: _____

1. Please indicate whether you are:

A Licensed Dealer	YES/NO
An Authorised Representative If Yes, please advise the name of your Licensee(s):	YES/NO
Operating under an Australian Financial Services Licence. If Yes, please advise your AFS Number:	YES/NO
A member of the Financial Planning Association	YES/NO

2. Do you require cover for **external** authorised representatives? YES/NO

(Please note we require each individual representative to complete a proposal form. We also require a copy of your guidelines for selection, training, supervision and auditing of your authorised representatives. Contact your broker for the necessary proposal form.)

3. Please list the top 5 financial institutions by percentage of client's funds invested:

	%
	%
	%
	%

Do any of these institutions have a proprietary/financial interest in your business? YES/NO

If Yes, please provide details:

4. Please indicate the percentage breakdown of your gross income (both fees and commissions) between the following activities:

1.	Financial Planning/Portfolio Management	%
2.	Life Insurance acting as AFS Licensed Holder	%
3.	Life Insurance acting as AFS Licensed Representatives	%
4.	General Insurance Agency/Broking (please note this will be excluded)	%
5.	Superannuation Administration-refers to the overall administration of self managed or regulated super fund	%
6.	Mortgage Originating/Mortgage Broking	%
7.	Other (please provide details)	%
		100%

5. Please advise the percentage of client's investments according to the following breakdown:

Investment		
1.	Australian equities on a DIRECT basis	%
2.	Australian equities via a MANAGED FUNDS basis	%
3.	Foreign equities via a MANAGED FUNDS basis	%
4.	Property trusts via a MANAGED FUNDS	%
5.	Fixed interest securities and/or cash	%
6.	Managed Investment Schemes (other than 2. to 5. above)	%
7.	Margin Lending via a MANAGED FUNDS basis	%
8.	Margin Lending on a DIRECT EQUITY basis	%
9.	Derivatives	%
10.	Other (please provide full details)	

6. **Australian Equities on a Direct Basis.** Please specify:

1.	Do you obtain external advice and/or view external analyst reports regarding investing into shares? <i>If No, please attach your guidelines in place to ensure the investment on this basis is suitable to your client.</i>	YES/NO
2.	Do you ensure the investments are spread across more than five industries?	YES/NO

7. **Margin Lending:**

1.	Do you provide your clients with a copy of the current product disclosure statement for each funding provider when recommending margin lending products?	YES/NO
2.	What is the maximum percentage of your client's overall portfolio that you recommend they place via margin lending?	%
3.	Do you provide taxation advice to the client on the implications of margin lending? If No, do you refer them to a Qualified Accountant? YES/NO	YES/NO
4.	Please attach a list of the Margin Lending facilities utilised by you.	

8. Are you involved in client portfolio management on a discretionary basis? YES/NO
If Yes, please advise percentage of income undertaken on this basis %

9. **Risk Management:**

1.	Do you conduct a risk appraisal/needs analysis for all financial planning/portfolio management clients and present a written plan to clients for their agreement?	YES/NO
2.	Do you provide all your clients with a copy of a Financial Services Guide?	YES/NO
3.	Do you conduct random audits on your clients existing portfolio?	YES/NO
4.	How often do you conduct audits on your existing clients portfolio?	
5.	Who will be conducting audits on clients portfolio?	
6.	Does a Para Planner prepare your plans?	YES/NO

DECLARATION

I the undersigned, **after enquiry**, declare as follows:

- I am authorised by each of the persons or entities in the definition of "Insured" to make this proposal.
- I have read this addendum and the accompanying documents and acknowledge the contents of same to be true and complete.
- I understand that, up until a contract of insurance is entered into, I am under a continuing obligation to immediately inform the insurers of any change in the particulars or statements contained in this addendum or in the accompanying documents.

Although the signing of this addendum does not bind the applicants to effect insurance, I acknowledge that the particulars and statements contained in this addendum and in the accompanying documents shall be the basis of the contract if a policy is issued. I also acknowledge that the addendum and the accompanying documents will be incorporated in the contract of insurance.

Name of Practice:	
Signed: Partner, Principal or Director:	Date: / /