CLIENT INFORMATION FUNDAMENTALS

CLIENT

Date

Email Address

Name

Date of Birth -MMM- -DD- -YYYY-

Gender Male ☐ Female ☐

Home Address

City

Province -Please Select-

Postal Code

Business Address

City

Province -Please Select-

Postal Code

Phone Numbers: Cell

Business

Occupation:

Driver's License Number

Expiry -MM- -YY-

Province Issued -Please Select-

Social Insurance Number

Canadian Resident? Yes ☐ No ☐

If no, where are you a resident?

US Citizen? Yes ☐ No ☐

Smoking Status Smoker ☐ Non-Smoker ☐

What is your marital status? Single ☐ Married ☐ Separated ☐ Divorced ☐

Height (Feet/Inches) -Feet- -Inches-

Weight (LBS)

Pre-existing health conditions? Yes ☐ No ☐

If yes, please explain:

Comments

Gross Montly Income $

Monthly Expenses $

Life Insurance in Place Yes ☐ No ☐	If yes, total amount of coverage $	Purchased From	Term
Critical Illness in Place Yes ☐ No ☐	If yes, total amount of coverage $	Purchased From	Term
Disability Insurance in Place Yes ☐ No ☐	If yes, total amount of coverage $	Purchased From	Term
Investments in Place Yes ☐ No ☐	If yes, product type -Please Select-	Purchased From	Total $
Investments in Place Yes ☐ No ☐	If yes, product type -Please Select-	Purchased From	Total $
Investments in Place Yes ☐ No ☐	If yes, product type -Please Select-	Purchased From	Total $
Investments in Place Yes ☐ No ☐	If yes, product type -Please Select-	Purchased From	Total $
Investments in Place Yes ☐ No ☐	If yes, product type -Please Select-	Purchased From	Total $

If other, please explain:

CLIENT INFORMATION FUNDAMENTALS

CHILDREN

	Name	Gender	Marital Status	Date of Birth	Comments (i.e. Citizenship, Residence)
1		-Select-	-Select-		
2		-Select-	-Select-		
3		-Select-	-Select-		
4		-Select-	-Select-		
5		-Select-	-Select-		
6		-Select-	-Select-		

GRANDCHILDREN

	Name	Gender	MaritalStatus	Date of Birth	Comments (i.e. Citizenship, Residence)
1		-Select-	-Select-		
2		-Select-	-Select-		
3		-Select-	-Select-		
4		-Select-	-Select-		
5		-Select-	-Select-		
6		Female	-Select-		

ADDITIONAL INFORMATION

Notes

Need Analysis - Know your client - Reason why - Risk Analysis