



The Profit Maker Safeguard™ Questionnaire - Business

Client Name

Please return to Fowler's Group in the enclosed reply paid envelope;
P.O Box 662, Cairns QLD 4870

1) Business Name

2) Client Contact Details

Person to contact _____

Phone _____

Mobile Phone _____

Postal Address _____

Street Address _____

Email Address _____

Website _____

3) Details of Business Structure

a) Please indicate whether the business is operated through a:

i) Company **ABN** _ _ _ _ _

ii) Trust

iii) Partnership

b) If you use a company or trust please advise the name of each company/trust


c) List all business names under which you trade.


d) When did the business commence?


4) Principals and Owners of the Business

Principal	Principal's Address	Principal's Associated Owner	Associated Owners Address	Assoc Owners % Interest in Business Entity	Value of Assoc Owners Interest in Business Entity

NB

-  The principals of the business are the persons who are responsible for the day to day management and operation of the business. Owners of the business may or may not be identical to the Principals. For example some ownership interests may be held by the Principal, the Principal's spouse, a private company associated with the Principal, a family trust associated with the Principal or any combination of those. If more than one entity is involved in the conduct of the business (see question 2) the Owners of each specific entity and their ownership proportions in each entity need to be clearly identified.

-  On the following page draw a diagram of the business structure. This often assists in clarifying the different entities involved in the arrangement.

-  If there is not enough space in the schedule provided to answer question 3 please provide an attachment.

Diagrammatic of Business Structures

5) Diagrammatic of Business Structures:



Nature of the Business:

Value of the Business:

6) We will need copies of:

- a) Memorandum & articles of association of each company;**
- b) Trust deeds for all trusts;**
- c) Partnership/shareholders' agreement (if you have one); and**
- d) The most recent balance sheet for each entity.**

If you do not have copies of these documents please advise who we can contact to obtain a copy.

7) Who is your Accountant and who should we contact at that firm?

Firm Name: _____

Contact: _____

8) Business Debt

- a) Indicate approximate levels of current debt financing (including unsecured/secured/finance leasing).**

- b) On the death of a partner/shareholder will surviving partners/shareholders assume liability for the business debt or will estate of deceased party be expected to payout its share of debt?**

c) How will the estate of the deceased party be released/indemnified?

9) Do you have a documented business succession plan?

Yes No

a) Is it fully funded?

Yes No

10) Insurance Cover you currently have

If insurance cover is not sufficient to cover pay-out when will the excess be payable?

i) Payable as a lump sum?

Yes No

ii) If payable by instalments indicate what period and what, if any interest is payable

11) Do you know who would acquire ownership if one of the principals were to die tomorrow?

12) Do you know how the new owner of the business would finance its purchase?

13) What does each principal do in the business?

14) How are they compensated? Salary? Bonuses? Dividends?

15) Do you borrow to augment working capital?

Yes No

a) If no what kind of arrangements are there?

16) What is the peak amount borrowed?

17) How are the loans secured?

18) Are the shareholders personal guarantors of any loans?

19) Do any of the shareholders have health impairments?

Yes No

If yes, please provide details

20) Do you have any plans to expand your business both short term and long term?

Yes No

21) How are you funding your long service leave obligation?

Key Person Valuation

- 1) Is there any particular borrowing or other finance facility that may need to be repaid or replaced on the loss of a Key Person?

Details \$ _____

Personal Guarantee \$ _____

- 2) Would specific contracts or clients be lost to the business on the loss of a Key Person?

Contracts _____ Value to Business _____

Clients _____ Value to Business _____

- 3) What loan accounts and other amounts would need to be paid by the business in the event of the cessation of service?

Loan Accounts	\$

- 4) What working capital would be required by the business to enable it to continue operations until suitable replacement was found?

\$ _____

- 5) Can you specify the direct and indirect costs associated with locating, training and establishing a suitable replacement?

Salary to Attract	\$ _____
Expense on Training	\$ _____
Expense of Relocating	\$ _____

- 6) What would be the likely loss of profits, particularly in the short term, because of the disruption and reorganisation of the business in the event of the loss of the key person?

\$ _____

What people will need to know when you die

Your *Executor* will need to know:

- ✚ Where your will, trusts, insurance policies, and other important documents are located
- ✚ What your will says. Who gets what?
- ✚ How will the estate taxes (if applicable) be paid?

Your *Spouse*: will need to know:

- ✚ How much money is there?
- ✚ How much is owed and to whom?
- ✚ How much income will he/she have? For how long?
- ✚ Who will run the business?

Your *Business Manager* will need to know:

- ✚ Does he or she have a job?
- ✚ Will the business continue?
- ✚ Whom does he or she report to?
- ✚ Who will run the business?

Your *Banker* will need to know:

- ✚ Who will run the business?
- ✚ How will loans be repaid?
- ✚ Is there any life insurance?

What will happen when a Key Executive is disabled?

- ✚ How much will you pay him?
- ✚ How long will you pay him?
- ✚ When will you have to hire a replacement?
- ✚ How long will you pay both?
- ✚ Do you have a plan in writing?
- ✚ How are payments funded?
- ✚ What would be the tax treatment of payments?
- ✚ What would be the impact on the company's
 - ⊕ Sales?
 - ⊕ Profits?
 - ⊕ Overhead?
 - ⊕ Credit Lines?
 - ⊕ Loan Repayment Capability?
 - ⊕ Buy & Sell Plans?
 - ⊕ Retirement Plans?

LETTER OF AUTHORITY

To whom it may concern

I/We, _____

Of (address) _____

request that all specified relevant information on our/my investments, insurances, superannuation, or other financial information be released to Fowler's Group.

Fowler's Group Pty Ltd is authorised representatives No:230575 for FYG Planners Pty Ltd, Australian Financial Services Licensee Number 224543 & Life Insurance Broker.

Please forward the requested information to:

Fowler's Group
P O Box 662
CAIRNS QLD 4870

Facsimile: (07) 4031 2478

A photocopy or facsimile of this authority has been provided to you for your records.

The original authority will be kept on file at Fowler's Group for a statutory period of seven (7) years after the date the authority was executed.

Yours faithfully,

Signed _____ Signed _____

Dated _____ Dated _____