

## Your Award Winning Insurer



1. Please provide a breakdown of the Total Gross Income derived by all proposed insureds (including fees and commissions) between the following activities:

Fees Earned From	Last Financial Year (Gross Income)	Anticipated Financial Year (Gross Income)
1. Mortgage Origination		
2. Mortgage Broking		
3. Mortgage Management		
4. Finance Broking		
5. Leasing and Hire Purchase		
6. Chattel		
7. Mezzanine		
8. Insurance Agency		
9. Insurance Broking		
10. Arranging of Deposit Bonds		
11. Other (please specify)		
Total		

2. Of the loans you arrange finance for, please advise the overall percentage split of loan type:

Loan Type		Percentage Split
1.	Residential	
2.	Commercial	
3.	Rural	
4.	Industrial	
5.	Investment Property	
6.	Plant and Equipment Finance Broking	





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/. Development/Construction	
8. Refinancing	
9. Other (please provide full details)	
Total	100%
Please advise the sources of finance used:	
Finance Provider	Percentage Split
Banks	
Non-Bank Financial Institutions (eg. Credit Unions, Building Societies, etc)	
Non-Bank Lenders (eg. Securitisation Trusts, Mortgage Aggregation Schemes)	
Managed Investment Schemes (eg. Solicitors Funds)	
Private Credit Providers	
Please list below and provide details of other sources of finance that are used:	
	Yes □
If Yes, please provide list and please advise how many credit providers you hold ac	creditation with:
Do you have authority to approve or settle loans on behalf of lenders?	
No ☐ Yes ☐ ► If yes, please provide full details including Delegated Loan Autlagreements for each lender you have authority to approve or settle loans:	
What percentage of loans arranged fall within the following categories:	
Loan to Value Ratios	
> 95% LVR	
90% to 95% LVR	
80% to 90% LVR	
0% to 80% LVR	



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7.	Has any lender revo	ked their agreement with you to p	rovide loan applicatio	s?	
	No □ Yes □ ▶	If yes, please provide full details	s:		
8.	Please indicate the	e percentage of loans you arrange dit Code:	finance for that is su	ject to	
	a) Do you ensure	e all loans subject to this code are	compliant?	No □ Ye	es 🗆
	If No, please provi	de full details:			
9.	Are you a member o	of a Professional Association?			
	No □ Yes □ ▶	If yes, please provide details:			
		, 00, p. 0000 p. 00000 uotano.			
10.	Are you a member o	of any External Dispute Resolution	Scheme?		
	No □ Yes □ ▶	If yes, please provide details:			
	No 🗆 Yes 🗆 💌	ii yes, piease provide details.			
11	Do you perform or a	rrange any valuations?			
	No □ Yes □ ▶	If yes, please provide details:			
12.	Of the loans you arr from the following:	ange finance for, please advise th	e portion of income a	d maximum value of loan	s arranged/derived
	Loan Type		% of Income	Maximum Value	of Loans (\$)
	Low Documentation	on Loans			
	Deposit Impaired I	oans			
	Credit-Impaired Lo	ans			
	Reverse Mortgage	s			
	Second Mortgages	<u> </u>			



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13.	No □ Yes □ ► If Yes, please provide full details:	monthly and/or other payments are deposited:
14	l. If you are required to witness a client's signature do you:	
	a) Always ensure this is done in your presence?	No □ Yes □
	b) Check ID of the person signing at the time of signing?	No □ Yes □
	If No, please provide full details:	
15.	If you are required to provide 100 point ID check as part of the loan applic original documentation?  Yes □ No □ ► If no, please provide details:	cation contract process, do you always sight the
1.0		
10	When hiring staff, do you always:     Ontact prior complexes and obtain actiof atom references?	N 57 5
	<ul><li>a) Contact prior employers and obtain satisfactory references?</li><li>b) Obtain a police record check?</li></ul>	No □ Yes □
17.	Have any claims been made against the proposed insured, it's or their embreach of professional duty?	No $\square$ Yes $\square$ ployees, principals or directors for alleging a
	No ☐ Yes ☐ ► If yes, please provide further details of the claim, the claim	m amount and any payments:
18.	Is the Proposer aware, after enquiry, of any circumstances or incident whi professional duty against the proposed insured(s), its/their employees, di	• •
	No $\square$ Yes $\square$ $\blacktriangleright$ If yes, please provide further details:	



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## **DECLARATION**

I declare that I am authorised to complete this Addendum on behalf of the Company and that to the best of my knowledge and belief the statements and particulars in this Addendum are true and correct and no material facts have been omitted or misrepresented. I undertake to inform Berkley Insurance Australia (BIA) of any change to any material fact which occurs before any insurance based on this Addendum is entered into.

By completing and signing this Addendum you acknowledge, accept and agree that in underwriting and issuing a policy BIA does and will rely on all disclosures, proposals, declarations and representations made by you to BIA.

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Date
Name of authorised individual/partner/principal/director
Signature of authorised individual/partner/principal/director

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