

# BLUE OCEAN

## FINANCIAL PLANNING

ESTABLISHED SINCE 1995

### BLUE OCEAN CORPORATE FACT FIND

#### SECTION 1: BUSINESS DETAILS

Name of organisation	
Type of organisation	Public Limited Company (PLC) / Limited Liability Company (LTD) / Partnership / Limited Liability Partnership (LLP) / Sole Trader (circle/delete as appropriate)
Telephone number	
Fax number	
Email address	
Website address	www.
Correspondence address	
Postcode	
Registered office address (if different to above)	
Postcode	

Name of contact		
Nature of business		
Date established		
Telephone	Home	
	Mobile	
	Work	

	1	2	3	4
Name				
Title/Designation				
Area of Involvement				

	1	2	3	4
Date of Birth				
Date joined company				
Bonuses				
Share of the business	%	%	%	%
Expected retirement age				

### SECTION 3: DIRECTORS OR PARTNERS ALSO A KEY PERSON?

Key Person				
Sum assured (if applicable)				
Date last reviewed				

### SECTION 4: OTHER KEY PERSONS (NON-DIRECTORS/NON-PARTNERS)

Name				
Date of birth				
Key person cover in force?				
Area of involvement				
Sum assured	£	£	£	£
Date last reviewed				

### SECTION 5: SHARE PURCHASE/ PARTNERSHIP PROTECTION

Is there a share purchase agreement?				
Any share purchase insurance?				
Sum Assured?	£	£	£	£
Date last reviewed				

### SECTION 6: OTHER (MAJOR) SHAREHOLDER / INTERESTED PARTIES

Name			
Share of the business	%	%	%
Is there a share purchase agreement?			
Any share purchase insurance?			
Sum assured?	£	£	£
Date last reviewed			

### SECTION 7: PRINCIPAL ASSETS

Premises			
Description (Factory, office, warehouse etc)			
Approximate value	£	£	£
Owner occupied?	YES	NO	YES
Approx. remaining mortgage	£	£	£
Leased?	YES	NO	YES
Unexpired term of lease	years	years	years
Date last reviewed	/ /	/ /	/ /

Other major assets	Cash/bank deposits	Quoted investments	Other
<b>Value</b>	£	£	£

### SECTION 8: BRIEF TRADING SUMMARY (LAST 3 YEARS)

<b>Financial year ends on</b>	<b>Corporation tax %</b>
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	Latest year	Previous tax year	Previous tax year
Number of employees			
Turnover			
Gross profit			
Net profit after tax			
If a company, was a dividend paid?	YES	NO	YES

What plans are there for expansion?	
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SECTION 9: VALUE OF BUSINESS	
Approximate current value of the business	£
Approximate share valuation (if applicable)	£
Date of valuation	/ /
Corporation tax – district and reference number if applicable	

SECTION 10: DIRECTORS/PARTNERS LOAN ACCOUNT				
Are there any personal loans from directors/ shareholders/partners?	YES		NO	
If yes, please provide details below				

Name					
Inception date of loan					
Amount of loan	£	£	£	£	£
Repayment period	Years	Years	Years	Years	Years
What arrangements are there to repay in the event of death?					

SECTION 11: COMMERCIAL LOANS				
Does the business have any outstanding loans?	YES		NO	
If yes, please provide details				

	Banks	Mortgages	Overdrafts	Other
Inception date of loan				
Amount of loan	£	£	£	£
Current interest rate	% pa	% pa	% pa	% pa
Repayment period	Years	Years	Years	Years
Who is guarantor?				
Repayment or interest only?				

Are there any other loans being considered?	<b>YES</b>		<b>NO</b>	
If yes, please provide details				
Please give any other relevant information e.g. life policies to cover loans				

SECTION 12: PROFESSIONAL ADVISERS			
Adviser	Name and address	Contact	Telephone Number
<b>Accountant</b>			
<b>Solicitor</b>			
<b>Banker</b>			

### SECTION 13: PENSIONS

Occupational pension scheme	Is the scheme self-administered?	YES		NO	
	Does the scheme offer AVCs?	YES		NO	

#### Company Sponsored Scheme

Scheme provider	Type (MP or DB)	Contracted out?	Start date	Normal Retirement date	No of members	Total annual cost
					Directors	£
					Non directors	

*(MP = Money Purchase, DB = Defined Benefit 'final salary')*

#### Partnership Sponsored Scheme (for employees)

Scheme provider	Type (MP or DB)	Contracted out?	Start date	Normal retirement date	No. of members	Total annual cost
						£

#### Group of Personal Pensions with Employer Contributions

Pensions provider	Contracted out?	Start date	Normal retirement date	No. of personal pensions	Total annual employer contributions
					£

### SECTION 14: EMPLOYEE BENEFITS

#### Income Protection Insurance (Permanent Health Insurance)

Product Provider	Level of benefits	Waiting or deferment period	No. of members	Review date	Total annual premium
					£
Notes					

Private Medical Insurance					
Product provider	Hospital band	Does cover include Employee's Family	No. of members	Review date	Total annual premium
					£
Notes					

Group Life Insurance				
Product provider	Level of benefits	No. of members	Review date	Total annual premium
				£
Notes				

SECTION:15 INVESTMENT PLANNING OBJECTIVES				
How much capital should be retained for emergencies?	£			
How much capital does the business have to invest?	£			
How much excess income does the business have to invest?	£			
How long will the business be able to invest for?	years			
Will the business require access to the invested Capital?	YES		NO	
Will the business require income from the invested capital?	YES		NO	
Does the business want to increase net investment income?	YES		NO	
Will the business accept income volatility?	YES		NO	
Does the business want to invest for capital growth?	YES		NO	

