

Customer Information Form

Information you provide on this form will help NSW Trustee & Guardian to support and manage your finances.

We're here to help. If you need any assistance completing this form, please contact us on **1300 507 811**.

Once completed, please return to 1300507811@tag.nsw.gov.au or mail to
NSW Trustee & Guardian, Locked Bag 5115, Parramatta, NSW 2124.

1 Personal information

Name				
Current address		Postcode		
Previous address		Postcode		
Mailing address (if different to current address)				
Email	Telephone			
Date of birth		Place of birth		
Gender	Male	Female	Non-binary	Prefer not to say
Medicare number				
Centrelink Reference Number or Department of Veterans Affairs Reference Number (if applicable)				
Do you pay or receive child support? If yes, what is the Child Support Reference Number?		Yes	No	
Are you an NDIS participant? If yes, please provide the NDIS number:		Yes	No	

What forms of identification do you have? Tick all that apply.					
Passport:		Current	Expired	Driver licence:	
				Current	Expired
Birth certificate:			Current	Expired	Other:
					Current
List other forms of identification (if any):					
Are you of Aboriginal and/or Torres Strait Islander origin? If both yes, please tick both 'yes' boxes.					
Yes, Aboriginal		Yes, Torres Strait Islander		No	
Do you identify as an Australian South Sea Islander?					Yes No
Do you belong to any specific ethnic, cultural or religious groups? If yes, please provide details:					Yes No
Do you speak any languages other than English at home? If yes, what languages?				Yes	No Not sure
Do you require an interpreter?					Yes No
Do you require any other assistance? (For example, a sign interpreter, hearing loop or wheelchair/mobility access) If yes, what assistance is required?				Yes	No Not sure

2 Family and other supports

Family contacts

Please list any family members such as a spouse, partner, parents, siblings or children.

Name	Relationship (Please note if deceased)	Address	Email	Telephone

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Name	Relationship (Please note if deceased)	Address	Email	Telephone

Primary contact person

Is there a primary person we can contact to assist you in making decisions?

Name		Relationship	
Address			
Email		Telephone	

Other key support contacts

Please list any other people we can contact to assist us in supporting you. This could be a case manager, carer, service providers, guardian, NDIS coordinator, or other important people in your life.

Name	Relationship	Address	Email	Telephone

3 What you own (assets)

Income

Please list any income you receive such as Centrelink or overseas pensions, a superannuation allocation, wages from employment or rental income.

Type of income	Who provides the income

Bank accounts

Please list any banking, building society or credit union accounts you have.

Name of institution	Account number	Location of card/ passbook	Names of any other signatories	Balance

Investments

Please list any bonds, superannuation, or managed funds that you have.

Name of institution	Type	Balance

Shares

For shares held with the Australian Stock Exchange, the holder identification number or security holder reference number is located on holding statements.

Name of institution	Number of shares	Holder identification number or security holder reference number

Real estate

Please list any property you own including mobile homes and caravans.

Address			
Who lives in the property?			
Who holds the keys?			
Is the property insured? If yes, who is the building insurer?	Yes	No	Not sure
Are the home contents insured? If yes, who is the contents insurer?	Yes	No	Not sure
What value are the contents insured for?			
Do you own any items of significant value? If yes, please provide details:	Yes	No	Not sure
If the property is an investment and rented, who is the managing agent?			
Is there a strata manager? If yes, please provide details:	Yes	No	Not sure

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Are the gardens maintained by anyone? If yes, who maintains them?	Yes	No	Not sure
Is any other maintenance required? If yes, please provide details:	Yes	No	Not sure

Motor vehicles

Make	Model	Year	Registration number
Car insurance company	Where is the vehicle kept?	Who drives the vehicle?	

Other assets, interests or entitlements

Please provide details of any other assets you own not already noted.

4 What you owe (debts and liabilities)

Regular expenses

Service	Provider	Is the cost of this service shared with anyone? If yes, please provide details:
Electricity		
Gas		
Water		
Phone		
Mobile phone		
Internet		
Chemist account		
Other (For example, gym memberships, subscriptions, Foxtel or online streaming services)		

Other debts

Please list any other debts such as mortgages, personal loans and credit cards.

Financial institution or provider	Type

5 Health and legal

Personal insurances

Please list any health, income protection and life insurances that you have.

Provider	Type	When is the next payment due?

Taxation

What is your tax file number?		When was your last tax return lodged?		
Do you have an accountant or tax agent? If yes, please provide details:		Yes	No	Not sure
Name		Address		
Email		Phone		

Solicitor

Do you have a solicitor? If yes, please provide details:		Yes	No	Not sure
Name		Address		
Email		Phone		

Power of Attorney

Please note a financial management order suspends a Power of Attorney from making financial and legal decisions on behalf of a person.

Do you have a Power of Attorney? If yes, please provide details:		Yes	No	Not sure
Name	Address			
Email	Phone			

Will and funeral arrangements

Do you have a Will? If yes, where is the Will kept? (Please provide a copy)		Yes	No	Not sure
When was the Will made?				
Do you have funeral insurance or a pre-paid funeral? If yes, please provide details:		Yes	No	Not sure
Do you have plans for your funeral such as a burial or cremation plot, or other funeral arrangements? If yes, please provide details including a copy of the burial certificate:		Yes	No	Not sure

6 Additional information

Please provide any other information that will assist us in managing your money. For example:

- What do you hope to achieve with NSW Trustee & Guardian and your money?
- What money do you need for regular activities and hobbies?
- Are you saving for a major purchase or holiday?
- Do you plan to move to a new house?

All personal information collected will be dealt with in accordance with the *Privacy and Personal Information Act 1998*. Your personal information will be held by NSW Trustee & Guardian. NSW Trustee & Guardian may also need to contact other people or organisations to gather information about your estate, or to exchange information to manage your affairs.

Name (Please print)			
What is the best way to contact you? Choose one:			
Phone	Email	Post	Other (please describe below)
Signature		Date	

By submitting this form, you understand that NSW Trustee & Guardian collects, stores and uses personal and health information to carry out its statutory functions. To learn more visit www.tag.nsw.gov.au/privacy.