Client Profile Form

This worksheet is to collect the necessary information to complete the appropriate applications for you. Please attempt to fill it out as completely as possible. Exact amounts are not necessary, instead ball park values that are reasonably accurate are important. When complete return by mail, fax, or secure email. If you have questions, please contact us at (304) 760-8715 or at info@wvhfs.com

Date:

# Personal Information

| Primary Owner | |  | Secondary Owner | |
| --- | --- | --- | --- | --- |
| Full Legal Name - F/M/L |  |  | Full Legal name - F/M/L |  |
| Social Security Number |  |  | Social Security Number |  |
| Birthdate |  |  | Birthdate |  |
| Marital Status | 🞏 Single 🞏 Married |  | Marital Status | 🞏 Single 🞏 Married |
| Home Phone Number |  |  | Home Phone Number |  |
| Mobile Phone |  |  | Mobile Phone |  |
| Work Phone |  |  | Work Phone |  |
| Email Address |  |  | Email Address |  |
| Home Street Address |  |  | Home Street Address |  |
| City/State/Zip |  |  | City/State/Zip |  |
| Mailing Address if different |  |  | Mailing Address if different |  |
| City/State/Zip |  |  | City/State/Zip |  |
| Driver's License ID |  |  | Driver's License ID |  |
| Issue Date |  |  | Issue Date |  |
| Expiration Date |  |  | Expiration Date |  |
| State/Country of ID Issuance |  |  | State/Country of ID Issuance |  |
| Employer Name |  |  | Employer Name |  |
| Occupation |  |  | Occupation |  |

# Financial Analysis

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Illiquid Assets | |  | Liabilities | |
| Primary Residence | $ |  | Primary Home Mortgage | $ |
| Other Property | $ |  | Other Property Mortgage | $ |
| Auto 1 | $ |  | Auto Loan 1 | $ |
| Auto 2 | $ |  | Auto Loan 2 | $ |
| Business Value | $ |  | Personal Loans | $ |
| Personal Property | $ |  | Student Loans | $ |
| Present Value of Pension | $ |  | Credit Cards | $ |
| TOTAL | $ |  | TOTAL | $ |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Liquid Assets | |  | Annual Income | |
| Checking Account 1 | $ |  | Salary 1 | $ |
| Checking Account 2 | $ |  | Salary 2 | $ |
| Savings Account | $ |  | Social Security Income 1 | $ |
| Certificate of Deposits | $ |  | Social Security Income 2 | $ |
| Taxable Accounts | $ |  | Pension 1 | $ |
| Traditional IRA's | $ |  | Pension 2 | $ |
| Roth IRA's | $ |  | Rental | $ |
| Qualified Plans | $ |  | Other | $ |
| Annuities | $ |  | Other | $ |
| TOTAL | $ |  | TOTAL | $ |

# Beneficiary Information

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Full Legal Name** - F/M/L |  |  | **Full Legal Name** - F/M/L |  |
| Social Security Number |  |  | Social Security Number |  |
| Birthdate |  |  | Birthdate |  |
| **Full Legal Name** - F/M/L |  |  | **Full Legal Name** - F/M/L |  |
| Social Security Number |  |  | Social Security Number |  |
| Birthdate |  |  | Birthdate |  |
| **Full Legal Name** - F/M/L |  |  | **Full Legal Name** - F/M/L |  |
| Social Security Number |  |  | Social Security Number |  |
| Birthdate |  |  | Birthdate |  |