



CLIENT REFERRAL FORM

Date: _____

YOUR DETAILS

Your Name

Your Company

CLIENT DETAILS

	Person 1	Person 2
Name		
Phone		
Email		

FINANCIAL DETAILS

	Person 1	Person 2
Borrowing Capacity <small>Please advise of clients borrowing capacity and if they have pre-approval</small>		
Income		
Saving Available		
Superannuation <small>(if known)</small>		

I WOULD LIKE BLUE WEALTH TO:

- Contact me for more details before speaking with the client/s
- Call the client/s to arrange a teleconference/meeting

Please return this form by faxing to **(02) 9743 0377** or emailing back to **Julie@bluewealth.com.au**
Blue Wealth will confirm receipt of the referral and contact the client within two business days.

Thank you for the referral. Blue Wealth values your support.

Blue Wealth Property Pty Ltd
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PLEASE PHOTOCOPY THIS FORM TO USE FOR FUTURE REFERRALS.