

**ONE SMALL THING
CAN GO A LONG WAY!**



About Holistic Investment Planners:

Holistic Investment Planners is a Financial Planning firm in Chennai, operating since 2000.

We have received an award from CNBC TV-18 for “Best Performing Financial Advisor”.

And

The short listing process of this award is powered by the rating agency ICRA.

We are financial planners and investment advisors to Senior Corporate Executives and NRIs.

We help our clients to

- Identify their financial goals
- Develop strategic investment plans for creating, preserving and managing wealth and
- Achieve results in their wealth management.

What We Do

By using our 360-degree wealth management approach, we provide our clients with strategies needed to preserve, manage and transfer their wealth. Our unique customized wealth management approach will help our clients avoid costly mistakes, manage risk, save time, and improve their overall financial investment results.

Holistic Investment Planners Private Limited has got its presence for more than a decade offering these financial services:

- Financial Planning
- Wealth Management
- Investment Advisory
- Money Management
- Retirement Planning
- Online Mutual Fund Investment

Our Financial Planning package is well received in the market.

This package is a combination of 7 services. They are

1. Financial Plan Construction,
2. Risk Management,
3. Existing Portfolio Revamp,
4. Investment Plan & Tax Plan,
5. Financial Plan Review,
6. Investment Plan Review and
7. Financial Plan Execution.

In addition to this Information Vault, to encourage you to achieve your financial goals, we invite you to sign up for our 30-Minute Complimentary Financial Plan Consultation for free.

Register [HERE!](#)

Get your appointment and plan your financial life with our Certified Financial Planners NOW!

How hard is it for you and your family to keep important information on track?

Going through every file to find particular information is a very stressful moment.

That's why we have created a personalized "Information Vault" to track you and your family's personal and financial information in one place.

We hope it will help you to keep track of any information you want on anywhere. So, you don't have to go through every file and don't have to get stressed to find the information.

This will help your family to reach out to this information easily when you are not around.





Your Personalized Message to Your Beloved

My Dear _____

Love,



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Personal Details

PAN	
UID No. (Aadhaar Card)	
Ration Card No	
Blood Group	
DOB	

Passport No.	
Driving License No.	
Voters ID Card No.	
EPF Account No. / UAN	
PPF Account No.	
Telephone/Mobile No.	
Mobile Service Provider	
Gas Consumer No.	
Gas Service Provider	
Electricity Account No.	
Electricity Service Provider	
Water Account No.	





Family Member Details

Name			
DOB			
Relationship			
Mobile Number			
PAN No.			
Aadhaar No.			
Voter ID			
Blood Group			
School /College / Office Contact Details			
Others:			





Emergency Contact Details

Contacts	Name	Phone No.
My Doctor		
My Friend		
Preferred Hospital Details		
Ambulance Service		
Health Insurance Company		
Hospitalisation Process Representative		
My Boss		
Emergency Contact at Work		
Others		

For a complimentary consultation, [click here](#)



Insurance Details

Please mention details of your life insurance, health insurance, property insurance etc.

Life Insurance Policy Details						
S.No	Company Name	Policy Name	Policy No.	Sum Assured	Date of Maturity	Nominee Name



Insurance Details

HOLISTIC

INVESTMENT PLANNERS

Health Insurance Policy Details						
S.No	Company Name	Policy Name	Policy No.	Sum Insured	Mediclaime Card No	Policy Type

Other Insurance Policy Details						
S.No	Company Name	Policy Name	Policy No.	Sum Assured	Policy Type	Other Details

For a complimentary consultation, [click here](#)



Bank Details

HOLISTIC

INVESTMENT PLANNERS

Name of 1 st Holder	Bank Name and Address	Account No.	IFSC	Joint Holder Name	Nominee Name



Personal Property Details

Property Type	Address of the Property	Registration Deed No.	Property 1 st Holder Name	Property Joint Holder Name

For a complimentary consultation, [click here](#)



Deposits With Banks/ Post Offices/ Company Deposits/ Debenture Bonds

1 st Holder Name	Name and Address of Bank / Post Office	Joint Holder Name	Nominee Name	Amount	Date of Maturity



Demat A/c

DP ID	Client ID	DP Name	Nominee Name	Bank Details



Share Trading A/c

Share Broker Name	Trading A/c No



Important Website Links & Login Credentials

You can put smart cues (which can be identified by your family member) against each password if you don't want to write them. Also, as passwords should be changed regularly, please keep updating here as well.

Purpose	Websites / URL	Login ID	Password / Hint



Location of Important Documents & Records

Bank Locker 1	
Name of the Bank	
Address	
Locker No.	
Keys Located at	
List of Contents	
Bank Locker 2	
Name of the Bank	
Address	
Locker No.	
Keys Located at	
List of Contents	

Type of Document	Location
Cheque Book(s) / Passbook(s)	
Public Provident Fund (PPF) Passbook(s)	
Fixed Deposit Certificate(s)	
Tax Files (Income Tax / Wealth Tax/Gift Tax)	
Educational / Domicile / Marriage Certificates	
Court Decisions / Judgements / Pending Litigation	
Insurance Files (Life / Mediclaim / General)	
Property Ownership Document(s)	
Loan related Document(s) (e.g. Loan agreements etc.)	
Shares / Bonds / Units Certificates	
Rent Receipts, Tenancy Agreements (Correspondence with Landlord/Tenants)	
Receipts of Telephone / Gas / Electricity etc.	
Will(s)	
Others:	



Contact Details of My Advisors

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INVESTMENT PLANNERS

1. Advocate / Legal Advisor

Name:

Address:

Contact No:

Email:

2. Chartered Accountant & Tax Consultant

Name:

Address:

Contact No:

Email:

3. Share Broker

Name:

Address:

Contact No:

Email:

4. Investment Advisor / FP

Name:

Address:

Contact No:

Email:

5. Life Insurance Agent

Name:

Address:

Contact No:

Email:

6. Health Insurance Agent

Name:

Address:

Contact No:

Email:

For a complimentary consultation, [click here](#)



Contact Details of My Advisors

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7. General Insurance Agent

Name: _____

Address: _____

Contact No: _____

Email: _____

8. Physician / Dentist

Name: _____

Address: _____

Contact No: _____

Email: _____

9. Bank Relationship Manager

Name: _____

Address: _____

Contact No: _____

Email: _____

10.

Name: _____

Address: _____

Contact No: _____

Email: _____

For a complimentary consultation, [click here](#)



Credit Card Details

Credit Card No.	Name of Bank	Name on Card	Expiry Date



Loan Details

Type of Loan	Loan A/c No.	Amount	Bank	EMI	Start Date	End Date



Additional Details


