

## Private File Review Checklist

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|----------------|-----------|
| Client's Name: | File Ref: |
| Reviewer:      | Date:     |
| Reviewee:      |           |

### File Management

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|   |   |     |    |     |
|---|---|-----|----|-----|
| 1 | Is the file well organised? (orderly & chronological)                         | Yes | No |     |
| 2 | Is the file inactive?   | Yes | No |     |
| 3 | Have all key dates been entered in a back up central diary?                   | Yes | No | N/A |
| 4 | Has a conflict of interest check been evidenced on the file?                  | Yes | No |     |
| 5 | Are all necessary checks for money laundering purposes evidenced on the file? | Yes | No | N/A |
| 6 | Is the file free from non-routine undertakings?                               | Yes | No | N/A |
| 7 | If no, are they entered in the Central Register?                              | Yes | No | N/A |
| 8 | Is the file free from complaints?   | Yes | No |     |
| 9 | If no, have they been reported to the Complaints Handling Partner?            | Yes | No | N/A |

Please comment on any concerns identified:

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**Correspondence**

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|---|---|-----|----|-----|
| 1 | Has the client been sent a Client Care Letter and, if applicable, the firm's terms and conditions?  | Yes | No |     |
| 2 | Have the instructions received, the client's objectives, advice given, and the action to be taken by the firm and the client been confirmed in writing to the client at the outset (in the client care letter or by separate letter)? | Yes | No |     |
| 3 | Has information about the progress of the case been sent to the client at appropriate intervals?  | Yes | No | N/A |
| 4 | Where applicable, have cost update letters been sent to the client?   | Yes | No | N/A |
| 5 | If the file is closed, has a file closing letter been sent to the client?   | Yes | No | N/A |

Please comment on any concerns identified:

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**Funding**

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|   |  |     |    |     |
|---|--|-----|----|-----|
| 1 | Have all payments on account been settled?                   | Yes | No | N/A |
| 2 | Is any costs estimate or limitation close to being exceeded? | Yes | No | N/A |
| 3 | If yes, has the client been advised?                         | Yes | No | N/A |

Please comment on any concerns identified:

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**Legal Issues**

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|   |   |     |    |     |
|---|---|-----|----|-----|
| 1 | Were instructions noted correctly and appropriately?  | Yes | No |     |
| 2 | Was advice given appropriate?   | Yes | No |     |
| 3 | Was action taken on the matter appropriate?   | Yes | No |     |
| 4 | Was preparation carried out on this matter appropriate?   | Yes | No |     |
| 6 | Did the client receive timely advice on the progress of their case or the steps to be taken next? | Yes | No | N/A |
| 7 | Has there been any unnecessary delay in progressing the client's matter?                          | Yes | No |     |
| 8 | Does the advisor have sufficient experience to deal with the matter?                              | Yes | No |     |

Please comments on the overall conduct of this matter and state any concerns identified:

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| <b>Is Corrective Action Required? (delete as Applicable)</b>       | <b>YES/NO</b> |
| <b>If yes, date corrective action completed:</b>                   |               |
| <b>If yes, date file handed back to reviewer for verification:</b> |               |
| <b>If yes, date corrective action verified by reviewer:</b>        |               |
| <b>Signature of reviewer:</b>                                      |               |
| <b>Date:</b>   |               |