

J. Bottom & Associates Ltd.,

Trustee in Bankruptcy

Joint Estate

PROPOSAL / BANKRUPTCY DATA FORM

Please fill out this form as completely and accurately as possible.

Interviewer: John David

J. BOTTOM & ASSOCIATES LTD.

Trustee in Bankruptcy
Suite 300 – 604 Columbia
New Westminster, B.C.
V3M 1A6

Tel 604.540.1920
Fax 604.524.0187
info@personalbankruptcybc.com

Source

Phonebook _____ Internet _____ Referral _____ Other _____

Your Personal Data

Surname _____ Given Names _____
(FIRST) (MIDDLE)

Are you known by any other names? _____

Social Insurance No _____ Birth date (dd/mm/yy) _____

Telephone - Home _____ Cellular _____ Business _____

Home Address _____ Postal Code _____

Mailing Address (if different from above) _____

Email Address _____ Moved into present address -(dd/mm/yy) _____

How long have you lived in British Columbia Day _____ Month _____ Year _____

Occupation/Employer _____

Address _____ Postal Code _____

Time with Present Employer _____ Last Date of Employment _____

Marital Status Married Single Divorced Separated Common-Law

Marital Status Change Day _____ Month _____ Year _____

Education

Highest level of education: University Diploma/Certificate Some Post Secondary
 High School University No High School

When did you last attend school: _____ Where: _____

Spousal Information

Spouse's Full Name _____
(first) (middle) (last)

Address (if different) _____

Spouse's Occupation _____ Work Phone _____

Spouse's SIN _____ Date of Birth _____

Dependents

Dependents That Rely On You for Financial Support:

Name	Relationship	Birth date	Address (if different)
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Previous Insolvency Data

Have you previously been bankrupt or made a proposal to your creditors? YES NO

If yes - Name of Trustee _____

Date of Bankruptcy _____

Place Assignment was Filed _____

Date of Discharge _____

Type of Discharge _____

Please provide a copy of the Order of Discharge.

Business Data

Have you owned or had an interest in a business in the last five years? _____

If yes - Corporation Proprietorship Partnership

Company Name & Address _____

Postal Code _____

Date Company Started _____ Date Company Finished _____

Nature of Business _____

Are any of your debts directly related to your business? _____ Yes _____ No

Percentage of debts related to business _____

Number of employees: _____

PERSONAL SCHEDULE OF MONTHLY INCOME AND EXPENSES

HOUSEHOLD INCOME

Please circle where applicable & attach paystubs

Your net monthly income	\$
Net earnings of spouse (if married/common law) or others	\$
Rents received from tenants or boarders	\$
Pensions <i>Identify</i> CPP/OAP/Other ()	\$
Child Tax Benefit/BC Bonus	\$
Employment Insurance Benefits/Social Assistance	\$
Detail other sources of income	\$
Child Support Received	\$
TOTAL MONTHLY INCOME	\$

HOUSEHOLD MONTHLY EXPENSES

Please attach an explanation if your expenses exceed your income.

Child Support Payments	\$
Spousal Support Payments	\$
Child Care/Daycare	\$
Health-Related Expenses/Prescriptions	\$
Fines/Penalties Imposed by Court	\$
Employment Related Expenses	\$
Debts where stay has been lifted	\$
Rent/Mortgage	\$
Property Taxes/Strata Fees	\$
Telephone	\$
Cable	\$
Electricity/Hydro/Heating Fuel/Oil/Water	\$
Smoking	Alcohol \$
Dining/Lunches/Restaurants	\$
Entertainment/Sports	\$
Gifts/Charitable Donations	Allowances \$
Food/Grocery	\$
Laundry/Dry Cleaning	\$
Haircuts	Toiletries \$
Clothing	\$
Car Lease/Payments	\$
Vehicle Repairs/Maintenance/Gas	\$
Car Insurance	\$
Public Transportation	\$
House/Apartment Insurance	Life Insurance \$
Payment to Trustee/Estate	\$
Payment to Secured Creditor	\$
TOTAL MONTHLY EXPENSES	\$

Causes of Debt

Do any of your liabilities arise from the following:

Fine or penalty imposed by a Court _____ Yes _____ No

Recognizance of bail bond _____ Yes _____ No

Alimony _____ Yes _____ No

Maintenance / Support of separated family _____ Yes _____ No

Fraud _____ Yes _____ No

Embezzlement _____ Yes _____ No

Misappropriation of fund while acting in a position of trust _____ Yes _____ No

Obtaining property through false pretenses or fraudulent misrepresentation _____ Yes _____ No

If yes to any of the above, please give details _____

Have you co-signed or guaranteed any debts? _____ Yes _____ No

If yes - Business _____ Personal _____ Both _____

Lender's Name & Address	Amount Borrowed	Borrower's Name & Address	Is Borrower Bankrupt?

If debt is business-related, please give details of company (if different from Business Section) _____

Recent Transactions

Have you disposed of or transferred any assets in the past twelve months?

_____ Yes _____ No If yes, give details below:

Have you made payments in excess of regular payments to a creditor in the past twelve months?

_____ Yes _____ No If yes, give details below:

Have you had any assets seized by any creditor within the past twelve months?

_____ Yes _____ No If yes, give details below:

Have you sold or transferred any real estate in the past five years?

_____ Yes _____ No If yes, give details below:

Have you made any gifts to relatives or others that were of a value in excess of \$500.00 in the past five years?

_____ Yes _____ No If yes, give details below:

Have you made any arrangements to continue to pay any of your creditors?

_____ Yes _____ No If yes, give details below:

Assets

Please value assets at liquidation value; i.e. the price if you sold the item through a newspaper or garage sale.

Asset	Serial No (if applicable)	Location (if different from home address)	Original Cost	Present Value
Cash on Hand / Savings				
Household Furniture & Effects				
Personal Effects				
Surrender Value of Insurance Policies (attach copies)				
Stocks, Credit Union Shares				
Estimated Tax Refund				
Property - Legal Description				
Motorized Vehicles - Please show Year, Make and Serial Number Automobile(s) Motorcycle(s) Boat(s) Trailer(s)				
Please provide details of any RRSPs, RESPs, Pension Plans, Savings Bonds, Collectibles (i.e. stamps, coins, sports cards, etc.)				
Tools of Trade				
Other _____				

Please attach copies of Registrations for Motor Vehicles.

Supplementary Personal Data

Are you involved in civil litigation from which you may receive monies or property?

_____ Yes _____ No If yes, give details below:

Will you receive an inheritance?

_____ Yes _____ No If yes, give details below:

Have you signed a wage assignment?

_____ Yes _____ No If yes, give details below:

Are there any writs or judgments outstanding against you?

_____ Yes _____ No If yes, give details below:

Have you had any property or money seized or garnisheed?

_____ Yes _____ No If yes, give details below:

Have you given any post-dated cheques?

_____ Yes _____ No If yes, give details below:

Do you bank with a financial institution to which you owe money?

_____ Yes _____ No If yes, give details below:

Are you or have you ever been involved in any matrimonial dispute which restricts your ability to deal with your assets?

_____ Yes _____ No If yes, give details below:

For which year did you file your last income tax return? _____

If you have any credit cards, please provide the following information:

Card / Store Name	Card Number

If you have an RRSP (Registered Retirement Savings Plan) or Pension Plan, please provide details below:

RRSP / Plan Name	RRSP / Plan Number

I hereby certify that, to the best of my knowledge and belief, the information contained in this application is true, correct and complete in every respect and fully discloses my assets and liabilities. I understand that I will be expected to cooperate with the Trustee in dealing with my affairs.

Signature of Applicant

Date