Case number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Debtor name on the chapter 13 petition: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Co-debtor name (if applicable): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Business name or DBA: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Cause for filing the current case and list any prior cases filed.

What circumstances led you to file a chapter 13 case?

Have you filed any prior cases? If yes please provide case numbers and disposition:

1. Nature and form of business

For each business you operate, state the name, address, form or business (Sole Proprietorship, Corporation, Partnership, Limited Liability Corporation), Tax payer identification number used or state that the business uses your social security number, main product or service, any past names used by the business, the fiscal year end for each business and date on which you started operation of the business.

1. Please state the percentage of each business listed above that you and your joint debtor (if applicable) own together.

If the business is incorporated provide the percentage of the business you own and the percentage owned by your spouse.

List the names of the President or Chief Executive, the Treasurer, and Secretary of the corporation(s) listed in question 2 or state that none of the businesses listed are incorporated.

For each corporation listed in question 2, if any, provide a print out of the Secretary of State website showing that the corporation is in good standing or explain if the corporation charter has lapsed.

1. Seasonality of business.

Is your business seasonal or is business activity mostly even throughout the year?

If your business is seasonal, list the months of highest activity and gross income in those months and the months of lowest activity and gross income in those months. If your business activity is even throughout the year please state the average gross income for the past six months and the average expected gross income for the next six months.

1. List all licenses and required registration of business operations with the State and Federal Government.
2. State whether all your businesses are in good standing with State, Federal and Local Agencies. If not, provide detail as to the lack of required licenses and permits and how you plan to resolve the issue.
3. Have all personal and business income tax returns been filed for the past four years?

Have all required personal tax returns been filed?

If there are unfiled returns, please list the year and the type of return that are not filed. If none are unfiled please state “NONE”

Have all required business tax returns been filed?

If there are unfiled business returns - such as payroll tax returns, sales tax returns, and business property statements to the tax assessor – list the type of missing return, the due date and when the return will be filed. If none are unfiled please state “NONE”

1. Does your business have employees other than yourself and your spouse?

If yes state how many are full time employees, how many are part time

If you have no employees, do you use independent contractors?

If yes, how many and how much were they paid in the last fiscal year.

1. List any leases incurred by you or your business, please state if you are a guarantor on the lease, the term of the lease, the monthly payment required under the lease and whether you intend to assume or reject the lease.
2. For each bank account maintained by you or any of your businesses, provide the name of the bank, the name of the account, the date of the last bank statement received for the account and the balance in the account as of the last statement. (Please do not provide the account number)
3. List all business assets with a value of $500 or more.
4. Did you or your business have any inventory on the date of the filing of the petition?

If yes, please describe the inventory, provide its cost of purchase and estimate its value if different from the purchase price.

1. Did you or your business have any accounts or notes receivable at the time of the filing of the petition?

If yes, provide detailed information on the account, balance and estimated collectible amount (attach extra sheets as necessary)

1. Does your business have any demands, claims or lawsuits for any money to be received from a third party or any insurance, bond or indemnity claim. Provide the name of the third party, insurance or bonding entity, the amount of the claim and whether any judgment has been finalized on the claim.
2. Are you required to carry any special types of insurance? If yes please list the type of insurance, name of insurer and policy limits.
3. Do you have hazard and liability insurance for your business? If yes, please list the type of insurance, name of insurer, policy limits and term of the policy.
4. Are you required to be licensed to operate your business, if yes list the type of license required and the current status of your license. Please provide the web site where the status of your license can be checked.
5. List all lawsuits against you and your business. List all administrative proceedings. For each item listed, please provide the parties, court or agency, the number of any such case or proceeding, and the status of the case or proceeding.
6. List any expense which is not paid monthly that was paid in the past six month. Provide amount of the payment, frequency (quarterly, semi-annual or annual), and date of next expected payment.
7. Provide bank statements for the past six months prior to the filing (Please make sure to redact Personal Identifiable Information)

I declare under penalty of perjury that I have read the questions listed in this Business Case Questionnaire and the responses and information I have provided are true and correct to the best of my knowledge, information and belief.

Date:\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature Signature

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Printed name Printed name

Case number:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_