

Name _____

Case Number _____

Date _____

CHAPTER THIRTEEN BUSINESS QUESTIONNAIRE

As Required By 11 U.S.C. Section 1302 (c)

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Standing Chapter 13 Trustee
P.O. Box 3450 Winter Park, FL 32790

INSTRUCTIONS: Complete this entire form using additional pages if necessary. Include the case number, debtor's name and the question number on all additional pages. All financial information, unless otherwise stated, is to be as of the bankruptcy filing date.

IMPORTANT

This form, along with **COPIES** of all documents requested, must be provided to the Trustee in a timely manner. All documents must be received and reviewed by the Trustee's office prior to the final 341 meeting.

1. DESCRIPTION OF BUSINESS

a. Name of business. _____

b. Address or location of business. _____

c. Name of owner(s). _____

d. Main product and/or service. _____

e. Is the business a:

sole proprietorship

partnership

corporation

sub chapter S corporation

Federal ID # _____

f. When did the business begin operations? _____

h. Are you leasing office space? Yes No

1. If yes, do you intend to continue with the lease? Yes No

i. Are you leasing any business equipment? Yes No

1. If yes, list the equipment, the creditor's name and address, and the terms of the lease on a separate page.

j. Is your business seasonal? Yes No

1. If yes, identify the good and bad months. _____

k. Have you pledged your receivables, rents, profits, or other cash as collateral for any loans? Yes No

2. VALUE OF THE BUSINESS (This section must be completed or the Trustee will not recommend confirmation)

a. Describe each asset with a value over \$1,000, using a separate page if necessary. Include the original cost, age and estimated current market value of each asset.

b. If applicable, estimate the market value of your inventory. \$ _____

c. What is the estimated market value of your accounts receivables? \$ _____

d. ESTIMATED VALUE OF THE BUSINESS, INCLUDING INTANGIBLE PROPERTY?

\$ _____

3. DESCRIPTION OF ALL BANK ACCOUNTS TO WHICH YOU HAVE ACCESS

Use a separate page if necessary.

a. Provide **COPIES** of bank statements and all cancelled checks for each account for the three months immediately prior to the Chapter 13 filing.

b. Are you the only authorized signatory(ies) on the account(s)? Yes No

1. If no, specify who else is an authorized signatory. _____

Bank Name	Account No.	Type of Account	Purpose

4. LIST ALL FULL AND PART TIME EMPLOYEES

Use a separate page if necessary.

Name of Employee	Position/Function	Mo. Salary/ Hourly Rate	P=Part F=Full

5. PAYROLL TAX REPORTS

If you have any employees, provide **COPIES** of IRS form 941 for the 4 quarters prior to filing and State of Florida UCT-6 form for the 6 months prior to filing your Chapter 13 petition.

6. FEDERAL TAX RETURNS

Provide **COPIES** of your personal and business federal tax returns, along with all supporting schedules, for the last three years. Also include copies of any W-2's or 1099's you received. If you receive income from tips that is not included on your W-2, include copies of IRS form 4137.

7. LICENSES

If applicable to your business, provide **COPIES**, not originals, of proof of the following:

- a. Business license
- b. Seller's permit
- c. Contractor's license
- d. Other _____

8. INSURANCE

If applicable, provide **COPIES** of proof of the following:

- a. Business operation liability insurance
- b. Worker's compensation insurance
- c. Vehicle insurance
- d. Liquor liability insurance
- e. Real and/or personal property insurance
- f. Other _____

9. PROFIT AND LOSS STATEMENT

Provide **COPIES** of the two most recent Profit & Loss statements (income statements) for this business.

10. BALANCE SHEET

Provide **COPIES** of the two most recent balance sheets for this business.

11. STATEMENT OF CASH FLOWS

Provide **COPIES** of the two most recent statement of cash flows for this business.

12. DECLARATION UNDER PENALTY OF PERJURY BY DEBTOR

I(we) declare under penalty of Perjury that I(we) have answered all questions and provided all applicable documents pertaining to this business questionnaire in good faith and that said answers and documents are true and correct.

Name: _____

Signature: _____

Date: _____

Name: _____

Signature: _____

Date: _____

- Upon review of submitted documentation, the Trustee may request additional financial information. Any additional financial documentation requested must be received and reviewed by the Trustee prior to the final 341 meeting.