

Name:

Date:

Case Number:

# CHAPTER THIRTEEN BUSINESS QUESTIONNAIRE

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

**INSTRUCTIONS:** Complete the entire form using additional pages if necessary. Please 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 Section 341 Meeting of Creditors.

## 1. DESCRIPTION OF BUSINESS

- a. Name of business: \_\_\_\_\_
- b. Address of location of business: \_\_\_\_\_  
\_\_\_\_\_
- c. Name of owner(s): \_\_\_\_\_
- d. Main product and/or service: \_\_\_\_\_
- e. Legal form of the business entity:  
 sole proprietorship \_\_\_\_\_ partnership \_\_\_\_\_ corporation \_\_\_\_\_  
 other \_\_\_\_\_ Federal ID# \_\_\_\_\_
- f. When did the business begin operation? \_\_\_\_\_
- g. Are you leasing office space? Yes \_\_\_\_\_ No \_\_\_\_\_  
 1. If yes, do you intend to continue with the lease? Yes \_\_\_\_\_ No \_\_\_\_\_
- h. 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.
- i. Is your business seasonal? Yes \_\_\_\_\_ No \_\_\_\_\_  
 1. If yes, identify the good and bad months: \_\_\_\_\_
- j. Have you pledged your receivables, rents, profits, or other cash as collateral for any loans?  
 Yes \_\_\_\_\_ No \_\_\_\_\_

**2. VALUE OF THE BUSINESS**

- a. Describe each asset with a value over \$1,000.00, 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. If applicable, estimate the market value of your 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 six months immediately prior to the Chapter 13 filing.
- b. Are you the only authorized signatory on the accounts(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 | Monthly Salary/Hourly Rate | P = Part Time<br>F = Full Time |
|------------------|-------------------|----------------------------|--------------------------------|
|                  |                   |                            |                                |
|                  |                   |                            |                                |
|                  |                   |                            |                                |
|                  |                   |                            |                                |

**5. PAYROLL TAX REPORTS**

If you have any employees, provide **COPIES** of IRS Form 941 for the 2 quarters prior to filing.

**6. FEDERAL TAX REPORTS**

Provide **COPIES** of your personal and business federal tax returns, along with all supporting schedules, for the last three years. Also include copies of all W-2's or 1099's you have 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, or proof of the following:

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

**8. INSURANCE**

If applicable, provide **COPIES** or 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 income statements for this business.

**10. BALANCE SHEET**

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

**11. STATEMENT OF CASH FLOWS**

Provide COPIES of the two most recent statements 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.