

1 – Personal Details

Case number

Full name

Full name of partner/spouse

Number and ages of dependants

<input type="text"/>		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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What is their relationship to you?

2 – Occupation Details

Please provide details of all your occupations, if more than one, using a separate section for each occupation.

Are you:

Employed

Self-Employed

Unemployed

Retired

2A – Employed

Please provide details of all your employers, if more than one, using a separate section for each employer.

Employer name

Employer address

Employer email

Employer telephone number

Your employee reference

Time with employer

Statement of Means

2B – Self-Employed

Please include all self-employments below.

How long have you been self-employed?

What work do you do?

What is the name of your business/businesses?

Do you have premises – office/shop/yard/lock-up? If **yes**, what is the address?

What is your annual turnover from all self-employments?

What amount of profit did the business/businesses make over the last year?

£

£

How much do you draw from your self-employment per month?

What were your total drawings in the last 12 months?

£

£

For each self-employment are you a:

If a partner, how many partners are there and what is your share of the partnership?

Sole trader

Partner

2C – Unemployed

How long have you been unemployed?

What steps are you taking to obtain employment?

Do you have any outstanding job interviews? If **yes** please provide details.

Statement of Means

2D – Retired

When did you retire?

By whom are your pension(s) paid?

How much is paid?

£

What is the frequency of payment?

3 – Income

Enter your income from all sources, and calculate the monthly equivalent, if necessary.

Gross annual income £	Weekly income £ (after tax, NI etc.)	Monthly income £ (after tax, NI etc.)
<input type="text"/>	<input type="text"/>	<input type="text"/>
Sub total monthly income £		<input type="text"/>

What benefits, if any, are you receiving? (please specify)	Monthly income £
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>

Other	Monthly income £
Investments	<input type="text"/>
Pension	<input type="text"/>
Trust Fund	<input type="text"/>
Total monthly income £ <input type="text"/>	

3 – Income continued

How often are you paid?

Weekly Monthly Other

If **other**, please provide details.

On which date are you paid?

Do you have any other jobs other than your main job? If **yes** please provide details.

4 – Credit Commitments

Enter your current borrowing commitments, e.g. Hire Purchase, Mail Order, Bank Loans, Store Cards, Credit Card repayments, Student Loans etc.

The required information in this section relates only to your contribution to the total amounts to be paid if payment is shared with others.

Name of lender 1

Original purpose

Amount £

Term

Loan secured

Monthly repayment £

Payments up to date £

Balance outstanding £

Name of lender 2

Original purpose

Amount £

Term

Loan secured

Monthly repayment £

Payments up to date £

Balance outstanding £

4 – Credit Commitments continued

Name of lender 3

Original purpose

Amount £	Term
<input type="text"/>	<input type="text"/>

Loan secured	Monthly repayment £
<input type="text"/>	<input type="text"/>

Payments up to date £	Balance outstanding £
<input type="text"/>	<input type="text"/>

Name of lender 4

Original purpose

Amount £	Term
<input type="text"/>	<input type="text"/>

Loan secured	Monthly repayment £
<input type="text"/>	<input type="text"/>

Payments up to date £	Balance outstanding £
<input type="text"/>	<input type="text"/>

Name of lender 5

Original purpose

Amount £	Term
<input type="text"/>	<input type="text"/>

Loan secured	Monthly repayment £
<input type="text"/>	<input type="text"/>

Payments up to date £	Balance outstanding £
<input type="text"/>	<input type="text"/>

Name of lender 6

Original purpose

Amount £	Term
<input type="text"/>	<input type="text"/>

Loan secured	Monthly repayment £
<input type="text"/>	<input type="text"/>

Payments up to date £	Balance outstanding £
<input type="text"/>	<input type="text"/>

Total of balances outstanding
£

Total monthly credit commitments
£

Carry this figure forward to the Expenditure Section 5.

Statement of Means

5 – Expenditure

Enter your monthly expenditure against the items listed below. Add additional items at the bottom of the table if necessary. For items paid annually or quarterly, enter in the appropriate column and work out the monthly equivalent.

The required information in this section relates only to your contribution to the total amounts to be paid if payment is shared with others.

	Annually £	Quarterly £	Monthly £
Total credit commitments (from Section 4)			
Mortgage/rent			
Council tax			
Property maintenance			
House buildings/contents insurance			
Life assurance			
Pension contributions			
Savings/investment commitments			
Heating (gas/oil/coal)			
Electricity			
Water rates			
Internet/broadband			
Telephone/mobile			
Car licence			
Car insurance			
Car expenses (petrol/service/repairs/MOT)			
TV licence			
Child maintenance support			
Train and bus fares/season tickets			

Statement of Means

6 – Other Liabilities

Do you owe money to anyone else? If **yes**, please state below.

Name 1

Address

Amount owed £

Name 2

Address

Amount owed £

Name 3

Address

Amount owed £

Are any creditors pressing for repayment? If so, please detail including what action they have taken to date.

Have you any Judgments registered against you?

Yes

No

If **yes**, please detail below.

Have any bankruptcy proceedings been issued against you?

Yes

No

If **yes**, please detail below.

Statement of Means

6 – Other Liabilities continued

Has an Individual Voluntary Arrangement been made?

Yes

No

If **yes**, please detail below.

If **no**, is there a current proposal for one?

Yes

No

Give details of Trustee Insolvency Practitioner / Administrator / Supervisor.

7 – Inheritances

Are you the beneficiary under any will where the testator is deceased and the estate has not yet been distributed?

Yes

No

If **yes**, please give details below.

Name of the Estate

Relationship to you

8 – Assets and Savings

8A – Your Home

Owner
(outright)

Owner
(mortgaged)

Tenant

With
partner/spouse

With
parents

Or
friends

If you are an **owner**, please answer the following questions.

Address of property

What is the approximate value of your property?

£

8A – Your Home continued

Are you the sole owner?

Yes No

If **no**, who are the co-owners?

What is their relationship to you?

If co-owned, how is the property held e.g., joint tenants or tenants in common?

If held as tenants in common, specify the percentage owned by you and each co-owner.

Are there any other occupants in the property?

Yes No

Do you intend to move? If **yes**, please provide details of when and where.

If the property is **mortgaged**, please answer the following questions.

What is the name of the Lender?

What is the address of the Lender?

What is the account/reference number?

Are the repayments up to date?

Yes No

How much is presently outstanding?

£

How much, if any, are the arrears?

£

What type of mortgage is it?

Repayment Endowment Pension Other

8A – Your Home continued

If there are other mortgages or charges on the property, please answer the following questions (please provide details for all additional mortgages or charges).

What is the name of the Lender?

What is the address of the Lender?

What is the account/reference number?

Are the repayments up to date?

Yes No

How much is presently outstanding?

£

How much, if any, are the arrears?

£

8B – Details of Other Properties

Other than the property detailed in Section 8A, do you own (or have an interest in) any other property, including properties overseas?

Yes No

If **yes**, please answer the following questions, using a separate section for each property.

Address of property

What is the approximate value of your property?

£

Name of co-owners (if any)

What is their relationship to you?

If co-owned, how is the property held e.g., joint tenants or tenants in common?

If held as tenants in common, specify the percentage owned by you and each co-owner.

8B – Details of Other Properties continued

Are there any other occupants in the property?

Yes No

If mortgaged or subject to any other charge on the property:

What is the name of the Lender?

What is the address of the Lender?

What is the account/reference number?

Are the repayments up to date?

Yes No

How much is presently outstanding?

£

How much, if any, are the arrears?

£

Do you receive any rental income from the property?

Yes No

If **yes**, how much?

Per week £

Per month £

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8C – Bank, Building Society Accounts

Do you have any Bank/Building Society Accounts? (include sole accounts/joint accounts and business accounts)

Yes No

If **yes**, please answer the remaining questions in this section using a separate row for each account.

Name of Bank/Building Society

Name of Bank/Building Society

Branch address

Branch address

Present balance £

Present balance £

8C – Bank, Building Society Accounts continued

Name of Bank/Building Society

Branch address

Present balance £

Name of Bank/Building Society

Branch address

Present balance £

8D – Other Assets

Please indicate which of the following assets you own, giving a brief description of the item and an approximate value.

Investments

Value £

Life policies (including policies held in support of any mortgages)

Stocks/shares (quoted and unquoted)

Furniture

Electronics

Motor vehicle

Household appliances

Statement of Means

8D – Other Assets

Boat/caravan	Value £
<input type="text"/>	<input type="text"/>
Other assets, including monies owed to you (please detail)	
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
Total £	
<input type="text"/>	

Have you considered realising your assets/investments to discharge your liability?

Yes No

Have you disposed of, or given as gifts, any assets which you owned worth in excess of £1,000 during the last three years?

Yes No

If **yes**, please give details:

Description of asset	Date disposed	Approximate value £
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>

Please provide any other information relevant to your means not already included above.

I confirm that, to the best of my knowledge and belief, the above is a true reflection of my current financial situation, in which no facts or details have been omitted.

Please provide documentary evidence to support the information provided on the form.

Signed*

Date

* By typing your name you are signing this form electronically. You agree that your electronic signature is the legal equivalent of your manual signature.