

BUSINESS CASE QUESTIONNAIRE

Debtor's Name: _____

Chapter 13 Case Number: _____

Name of Business: _____

Description of Business Activities: _____

Type of Business Organization: _____

Has Business ever been incorporated: ____ Yes ____ No

If yes, list dates incorporated: _____

Date business began: _____

Federal ID number (if applicable): _____

List business bank accounts: _____

Checklist:

A. Provide copies of current and prior years' income tax returns (all schedules).

B. Provide complete copy of monthly business budget (income & expenses).

Questionnaire:

1. Does the business have employees? ____ Yes ____ No

If so, how many? _____

Does business withhold on these employees? ____ Yes ____ No

If so, attach copy of prior quarterly payroll tax return (form 941).

If not, how are employees compensated? _____

Are 1099's issued? ____ Yes ____ No

2. Does the business keep inventory on hand? ____ Yes ____ No

If so, provide information on insurance.

Sales tax ID# _____ Attach copies of prior six month reports.

What is the average monthly value of inventory? \$ _____

Do vendors allow business to purchase inventory on credit? ____ Yes ____ No

List all suppliers and vendors who allow a revolving credit

account:

3. What is the balance of the business accounts receivable (A/R)? \$ _____

How many accounts make up the A/R? _____ (approximate)

Does the business factor the A/R? _____ (Attach factoring agreement)

How old are the receivables? _____ (Supply aged list if numerous)

What amount is reasonably collectible? \$ _____

4. Is the business cyclical? _____ Yes _____ No

If so, list the busy season: _____

list the slow season: _____

5. Does the company own or lease office space or other real property? _____ Yes _____ No

Address of property: _____

Monthly payment: \$ _____

Term of payments or lease: _____

Date purchased or leased: _____

6. Does the company lease business equipment or autos? _____ Yes _____ No

Description of leased/rented items _____

Monthly payment \$ _____

Term of Lease _____

If more than one item, attach separate information for each lease.

7. Does the business carry the following insurance policies?

			Policy #	Carrier
a. Commercial liability?	_____ Yes	_____ No	_____	_____
b. Workman's Compensation?	_____ Yes	_____ No	_____	_____
c. Commercial Property?	_____ Yes	_____ No	_____	_____
d. Automobile Coverage?	_____ Yes	_____ No	_____	_____
e. Other (list) _____				

Are all policies current? _____ Yes _____ No

8. Is the business required to have any business licenses? _____ Yes _____ No

If yes, please list: _____

Are licenses current? _____ Yes _____ No

Attach a list of business assets, including the fair market value of each asset.

Exclude items valued below \$250.00.