**BUSINESS QUESTIONNAIRE**

Gretchen D. Holland, Chapter 13 Trustee

Case No.:   Name of Debtor 1:

Attorney: Name of Debtor 2:

**INSTRUCTIONS:** Complete all pages of this form. Attach additional pages if you need more space.

**THE TRUSTEE’S OFFICE NO LONGER ACCEPTS DOCUMENTS SENT AS EMAIL ATTACHMENTS. Debtor's Attorneys are now required to submit documents to the Trustee’s office using the secure Document Upload Portal. For information on registration and usage, please visit** [**https://upstate13.com/attorneys.aspx**](https://upstate13.com/attorneys.aspx) **and view the information under the Document Upload Portal heading.**

**IMPORTANT:** All information must be provided in the form requested. Information and documents presented in a disorganized fashion will not be accepted. Failure to provide this completed form, along with copies of the documents requested, will result in confirmation of your bankruptcy plan being delayed or denied. Please contact your attorney if you have any questions.

1. Name of Business

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1. Address of Business

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1. Description of Business; Main Product or Service Provided

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1. Select which of the following business entities best describes your business:

sole proprietorship (DBA) partnership corporation

1. Names and Addresses of all Owners, Partners, and Officers:

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1. Date business was started:
2. Is your business space leased or owned?
3. If leased, do you intend to continue with the lease?
4. Are you leasing any business equipment or machinery?

If yes, please complete the following:

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| --- | --- | --- |
| Type of Equipment | Name of Creditor | Monthly Lease Payment |
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|  |  |  |

1. List all assets (including furniture, machinery, equipment, supplies, and inventory) of the business:

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| --- | --- | --- | --- |
| Description of Asset | Year Purchased | Original Cost | Current Market Value |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

1. Is the business owed any accounts receivable? If yes, in what amount? Are they collectible?

If no, why not?

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1. List all bank accounts of the business (please also include a copy of the bank statement for each account showing the balance in the account on the date your bankruptcy case was filed):

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| --- | --- | --- | --- |
| Bank Name | Authorized Signers on the Account | Type of Account | Balance as of filing date |
|  |  |  |  |
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1. **Do you anticipate borrowing money for your business while you are in bankruptcy (incurring post-petition trade credit)?**
2. List all employees and independent contractors of the business:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Name | Position/Function | Monthly Salary or Wages | Part-time, Full-time, or 1099 | Length of employment |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

1. Have you paid all required employee withholding taxes?
2. Have you paid all required sales taxes?
3. Is your business adequately insured?
4. Using the attached form, provide a Profit and Loss Statement for each of the six (6) months prior to filing bankruptcy, as well as for the current month. If you do not maintain P&Ls, please complete the attached Projected Business Budget.

Signature of Debtor Signature of Joint Debtor (if applicable)

Date Date