

# Client Intake Form

Date: \_\_\_\_\_

How did you hear about us? \_\_\_\_\_

Have you ever filed bankruptcy before? \_\_\_\_\_

If yes, when? \_\_\_\_\_ Where? \_\_\_\_\_ What chapter? \_\_\_\_\_

## Contact Information:

Name: \_\_\_\_\_  
First Middle Last

Also known as (aka) or formerly known as (fka):

\_\_\_\_\_   
First Middle Last

Street Address: \_\_\_\_\_  
Street Apartment #

\_\_\_\_\_   
City State Zip Code County

Mailing Address (if different): \_\_\_\_\_

\_\_\_\_\_   
City State Zip Code County

\_\_\_\_\_   
Home Phone Cell Phone Work Phone Emergency Phone

\_\_\_\_\_   
Email Date of Birth Social Security #

Spouse's Name: \_\_\_\_\_  
First Middle Last

Also known as (aka) or formerly known as (fka):

\_\_\_\_\_   
First Middle Last

Address (If different from spouse): \_\_\_\_\_  
Street Apartment #

\_\_\_\_\_   
City State Zip Code County

\_\_\_\_\_   
Home Phone Cell Phone Work Phone Emergency Phone

\_\_\_\_\_   
Email Date of Birth Social Security #

- Have you lived at this address for the last 3 years?
- Have you and a spouse (or legal equivalent) lived in the following community property state/territory in the last 8 years (Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington or Wisconsin)?

**Residence Information:**

Do you own or rent? \_\_\_\_\_

Rental Info (if applicable): \_\_\_\_\_  
 Landlord's Name

\_\_\_\_\_  
 Address City State Zip Code

Owner Info (if applicable):

Description of Property (house, apartment, mobile home, etc.) with **NO** liens: \_\_\_\_\_

Description of Property (house, apartment, mobile home, etc.) with liens: \_\_\_\_\_

1<sup>st</sup> Mortgage Company/Landlord: \_\_\_\_\_  
 Name Account #

\_\_\_\_\_  
 Address City State Zip Code

Balance: \_\_\_\_\_ Monthly Payment: \_\_\_\_\_ Arrearage Amount: \_\_\_\_\_

2<sup>nd</sup> Mortgage (home equity loan) Company: \_\_\_\_\_  
 Name Account #

\_\_\_\_\_  
 Address City State Zip Code

Balance: \_\_\_\_\_ Monthly Payment: \_\_\_\_\_ Arrearage Amount: \_\_\_\_\_

- Is there a co-owner/co-debtor? \_\_\_\_\_
- Is the property currently in foreclosure? \_\_\_\_\_
- Have you sold or transferred ANY real estate in the last two (2) years? \_\_\_\_\_
- Do you owe rent on prior residences? \_\_\_\_\_

## Personal Property Information:

- List Automobiles/Motorcycles/ Tractors/ATVs/Boats/Aircrafts etc.:

Description			Approx. Mileage	Creditor	Amount Owed	Date Purchased
(Year)	(Make)	(Model)				
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____

- Have you been in an accident in the last two (2) years? \_\_\_\_\_

- List the approximate “yard sale value” for the following personal and household items you own (\*list items with a value of \$500.00 or more on separate line):

<u>Description</u>	<u>“Yard Sale Value”</u>	<u>\$ Owed on item</u>	<u>Creditor (if applicable)</u>
Household Goods & Furnishings (appliances, furniture, china, etc.)	_____	_____	_____
* _____	_____	_____	_____
* _____	_____	_____	_____
* _____	_____	_____	_____
Electronics (tv, audio/video equip., gaming consoles, computers, camera, cell phones, etc.)	_____	_____	_____
* _____	_____	_____	_____
* _____	_____	_____	_____
* _____	_____	_____	_____
Collectibles (antiques, artwork, books, stamps, coin, cards, etc.)	_____	_____	_____
* _____	_____	_____	_____
Sports/Hobby Equipment (sports, outdoor, photographic, carpentry, musical instruments, etc.)	_____	_____	_____
* _____	_____	_____	_____
Firearms (including ammunition and related equipment)	_____	_____	_____
* _____	_____	_____	_____
Clothes	_____	_____	_____
* _____	_____	_____	_____
Jewelry (costume, engagement/wedding, heirloom, watches, etc.)	_____	_____	_____
* _____	_____	_____	_____
Non-Farm animals (dogs, cats, horses, small pets, etc.)	_____	_____	_____
* _____	_____	_____	_____

**Personal Property Information (cont.):**

- List the approximate value if you own any of the following financial assets:

<u>Description</u>	<u>Value</u>	<u>\$ Owed on item</u>	<u>Creditor (if applicable)</u>
Deposits of money (bank accounts, C.D.s., etc.)			
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
Bonds, Mutual Funds, Stocks or Money Market Accounts			
_____	_____	_____	_____
Interest in Business (including LLCs, partnerships, and joint venture): _____%			
Retirement/Pension accounts			
_____	_____	_____	_____
_____	_____	_____	_____
Security deposits and prepayments (prepaid rent, utilities, etc.)			
_____	_____	_____	_____
Annuities			
_____	_____	_____	_____
Interests in education IRA			
_____	_____	_____	_____
Trusts, equitable or future interests			
_____	_____	_____	_____
Patents, copyrights, trademarks or other intellectual property			
_____	_____	_____	_____
Licenses, franchises & other general intangibles (building permits, liquor licenses, professional licenses, etc.)			
_____	_____	_____	_____

**Personal Property Information (cont.):**

- **List the approximate value of money or property *owed to you*:**

<u>Description</u>	<u>Value</u>
Tax Refunds _____	_____
Family Support (past due alimony, spousal support, child support, divorce settlement or property settlement) _____	_____
Other amounts owed to you (unpaid wages, sick/vacation pay, workers' compensation, etc.) _____	_____
Interest in insurance policies (health, disability, HSA, life, homeowner's/renter's, etc.) _____	_____
Interest in property due to someone's death (living trust, proceeds from life insurance policy, etc.) _____	_____
Interest in claims against third parties - filed or unfiled suit (accidents, employment disputes, insurance claims or rights to sue) _____	_____
Other contingent and unliquidated claims of every nature _____	_____

- **List any Business related property you own or have an interest in:**

Description: \_\_\_\_\_

- **List any Farm and Commercial related property you own or have an interest in:**

Description: \_\_\_\_\_

- **List all property you own or have an interest in that has not already been listed:**

Description: \_\_\_\_\_

## Creditor Information:

- List **ALL** debts that have not been previously listed, including credit cards, personal loans, check-cashing services, medical debts, as well as, debts owed for taxes, student loans and back alimony/child support (use separate sheet if necessary) :

Creditor Name	Creditor Address	Address Line 2	City	ST	Zip	Last 4 Digits of Account #	Amount Owed
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- Are any of these debts co-signed?
- Have you taken out any new loans in the last three (3) months?
- Have you paid off any loans in the last three (3) months?
- Have you transferred any credit card balances in the last three (3) months?
- Have you paid \$600 (total) to any one creditor in the last three (3) months?
- Have you paid \$200 to any friends, relatives or business partners during the last year?
- Have you voluntarily returned any property/merchandise to any creditor during the last year?
- Are you currently being garnished or sued?

**Income Information:**

Employer: \_\_\_\_\_  
 Name Address City ST Zip Code

Employer Phone No.: \_\_\_\_\_ Job Description: \_\_\_\_\_

Length of Employment: \_\_\_\_\_ Pay Cycle (circle one):  
 Weekly  
 Bi-weekly  
 Semi-Monthly  
 Monthly

Spouse's Employer: \_\_\_\_\_  
 Name Address City ST

Zip Code

Employer Phone No.: \_\_\_\_\_ Job Description: \_\_\_\_\_

Length of Employment: \_\_\_\_\_ Pay Cycle (circle one):  
 Weekly  
 Bi-weekly  
 Semi-Monthly  
 Monthly

Do you receive income from **ANY** other source?

- |                 |            |               |
|-----------------|------------|---------------|
| Social Security | Retirement | Worker's Comp |
| Unemployment    | Disability | Rental Income |
| Child Support   | Alimony    | Family Help   |
| Food Stamps     | Other      |               |

## Expense Information:

- List of dependents:

Relationship	Initials	Age	Can you claim on tax return?	Do they live with you?
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- List amount spent (on average) each month on the following:

Rent/Mortgage .....	_____
Real Estate Taxes (if not included in payment) .....	_____
Homeowner's or Renter's Insurance (if not included in payment) .....	_____
HOA or condominium dues .....	_____
Electricity, heat, natural gas .....	_____
Water, sewer, garbage .....	_____
Telephone, cell phone, Internet, satellite/cable service.....	_____
Food and housekeeping supplies .....	_____
Childcare and education costs .....	_____
Personal care products and services .....	_____
Medical & Dental expenses (co-pays, prescription & other out of pocket expense).....	_____
Transportation (fuel and vehicle maintenance) .....	_____
Entertainment, clubs, recreation, newspapers, magazines, books, etc. ....	_____
Charitable contributions/ religious donations .....	_____
Insurance	
Life Insurance (if not deducted from your pay).....	_____
Health Insurance (if not deducted from your pay).....	_____
Vehicle Insurance .....	_____
Other Insurance (if not deducted from your pay). Specify: _____	_____
Installment Payments	
Car Payment 1 .....	_____
Car Payment 2 .....	_____
Other. Specify: _____	_____
Other. Specify: _____	_____
Alimony, maintenance and other support (if not deducted from your pay).....	_____
Other monthly expense not previously listed.	
Specify: _____	_____
Specify: _____	_____