BUSINESS EXAMINATION QUESTIONNAIREOffice of Isabel C. Balboa, Chapter 13 Standing Trustee

The following documents MUST BE ATTACHED to this Questionnaire or your § 341(a) Meeting of Creditors will be continued and you will be requested to return once business documents are produced and reviewed. Please place a check mark ($\sqrt{\ }$) next to each item which you have attached.

1.	Completed and signed Business Examination Questionnaire including ALL pages, page 1 through 7.
2.	If you lease business property, a copy of any <u>written lease of the business</u> <u>property</u> .
3.	If you lease property to others, copies of all leases.
4.	Copies of <u>bank statements</u> for the last six (6) months, for <u>ALL</u> business and personal bank accounts
5.	If your business has employees, provide copies of <u>payments of employer/</u> <u>employee withholding taxes</u> that your business paid to State of New Jersey and Federal governments for the last two quarters.
6.	If you are an independent contractor, provide <u>copies of your 1099</u> for the last tax year. If none are available from last year, then provide copies of your last four payments received for work performed.
7.	If your business collects sales tax, provide <u>proofs of payment of sales & use tax</u> for the last two quarters.
8.	Complete copies of your <u>Federal Income Tax Returns</u> (personal and corporate, if filed separate from you), for the last two tax years. If you and your spouse filed separately, provide complete copies of both spouse's personal tax returns for the past two tax years.
9.	Evidence of insurance with dates of coverage for: a. business operation liability insurance b. workers' compensation insurance c. vehicle insurance on ALL vehicle(s) used by the business d. liquor liability insurance e. professional liability insurance **NOTE: If the insurance coverage has expired, then DO NOT send it as "proof" of insurance

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	10.	Copy of <u>business and/or pro</u> accountant, etc.	fessional license(s),	such as medical, legal	,
	11.	Profit & Loss Statements fo Please identify the months	,	0.1	penses).
	(Properio	fit & Loss Statement and all dod).	bank statements m	ust cover the <u>same</u> six	k-month
"not	applical	FIONS: Complete all questions ble." Use a separate page if you i number you are answering.			
**** this q	Be sure to uestionnai	o sign where indicated on Page 7 (if the ire even if only one spouse is involved in	bankruptcy has been file n the bankruptcy).*****	d by both husband and wife,	, <u>both</u> must sign
in ur	organiz	NT: All information must be in the ed fashion will not be accepted, Please contact your attorney if y	and will result in th	e examination being de	_
Trus chec	tee at le klist and	st along with <u>COPIES</u> of all ap ast one week prior to your scheo l/or copies of all applicable doc or eventual denial of confirmat	duled 341(a) Hearing uments requested m	g. Failure to provide the ay result in adjourning	ne completed
1.	What	circumstance(s) led you to file a	Chapter 13 Bankrupte	ey?	
2.	DESC	CRIPTION OF BUSINESS			
	a)	Name of your Business:			
	b)	Type of business that you open	rate:		
	c)	Main product and/or service: _			
	d)	Is your business a:			
		Sole proprietorship	Partnership	Corporation	
		Limited Partnership	Sub-Chapter S Co	orporation	
		Professional Corporation	Limited Lia	ability Company	

Wł	at date did you begin operating your business?				
1)	Was the business purchased? □ Yes	s	□ No		
2)	If purchased, what was the purchase price?				
3)	If started as a new business, what were the initial start	up costs?			
If i	If incorporated:				
1)	Date and state of incorporation				
2)	If a foreign corporation, date of authorization to do bu	siness in N	ew Jersey		
3)	Are all corporate books up to date (i.e., annual meeting date the petition was filed? □ Yes □ No		etc.) through th		
4)	Location of corporate books				
	Location of corporate books here is the business operated?				
Wł					
Wł	here is the business operated?				
Wł Is t	he property where the business is operated owned or leased	? □ Owned	d □ Leased		
What Is to	he property where the business is operated owned or leased If leased, is there a written lease?	? □ Owned □ Yes ?? □ Yes	d □ Leased □ No □ No		
What Is to 1) 2) 3)	he property where the business is operated owned or leased If leased, is there a written lease? If leased, is it your intention to continue with the lease Provide the name and address of the owner of the property.	? □ Owned □ Yes ?? □ Yes	d □ Leased □ No □ No		
What Is to 1) 2) 3)	he property where the business is operated owned or leased If leased, is there a written lease? If leased, is it your intention to continue with the lease Provide the name and address of the owner of the prope to the debtor.	? □ Owned □ Yes ?? □ Yes erty and rela	d □ Leased □ No □ No ationship, if an		
Wh Is t 1) 2) 3) Are	he property where the business is operated owned or leased If leased, is there a written lease? If leased, is it your intention to continue with the lease Provide the name and address of the owner of the properto the debtor. e you leasing separate office space?	? □ Owned □ Yes ?? □ Yes erty and rela	d □ Leased □ No □ No ationship, if an		
Wh Is t 1) 2) 3) Ard 1)	he property where the business is operated owned or leased If leased, is there a written lease? If leased, is it your intention to continue with the lease Provide the name and address of the owner of the prope to the debtor. e you leasing separate office space? If yes, is there a written lease?	? □ Owned □ Yes ?? □ Yes erty and rela Yes □ Yes Yes erty and rela	d □ Leased □ No □ No ationship, if an wÍ □ No No		

	1)	Is your bu	siness seasonal?		Yes		No
		If yes, spe	ecify your good months	and poor months:			
	m)	Have you for any lo	pledged your receivableans?	es, rents, profits, or othe	er cash Yes	as collater	al No
3.	DESC	CRIPTION C	OF ASSETS				
	a)	In additio 1) What a fair 2) How	arate page, describe ean to the description, tell would you sell the item price? much did the item cost y is the age of the equipm	us: for in its present condit	ion ass	uming	
	b)	What wou	ald you estimate the man	rket value of your inven	tory to	be?	
	c)	What wou	ald you estimate the man	rket value of your accou	ints to	be?	
	d)		re to buy your business		n, how	much wou	ıld pay for your
4.			COUNTS TO WHICH ge if necessary.	YOU HAVE ACCES	S		
	a)	accounts Trustee m	COPIES, not originals, o (business and personal pay request copies of chood in order to clarify data	d) that you and/or you eck registers and/or one	r spou or moi	se have ac	cess to. (Note:
	b)	•	he only authorized signa pecify who else is an aut	• • •	t(s)	Yes	No
Bank	Name		Account Number	Type of Account		Purpose	

		My busines	s does not have empl	oyees. (Please initial)
Nam	e of Employee	Position/Function	Mo. Salary	P=Part F=Full
	, r			
	STATE TAXING A Do you use INDE	OYER WITHHOLDING I UTHORITIES, FOR THE PENDENT CONTRACTO	LAST TWO QUARY ORS? Yes No	<u>ΓERS</u> .***
	DID NOT REPO	RT PAYMENTS.	·	YPLANATION WHY YO
7.	DID NOT REPO		Yes No	
7. 8.	DID NOT REPORT Does your busine If so, provide copi Attach complete or returns) for the	RT PAYMENTS. ss collect SALES TAX??	Yes No les & Use Taxes for the AX RETURNS (personds/wives filing sepa	nal and business/corpor rate returns <u>must</u> provi
3.	DID NOT REPORED Does your busine If so, provide copic Attach complete coreturns) for the lacomplete copies of PROOF OF INSUIT applicable, proval business operation of the lacomplete copies of the	RT PAYMENTS. ss collect SALES TAX?? es of proof of payment of Sa copies of your FEDERAL T last two (2) years. Husba f both spouses' tax returns	Yes No les & Use Taxes for the AX RETURNS (personds/wives filing separator the last two (2) y f proof of the following rker's compensation in the ee or real and/personal	ne last two (2) quarters. In al and business/corpor rate returns must prov ears. g: asurance I property insurance
	DID NOT REPORE Does your busine If so, provide copic Attach complete or returns) for the lacomplete copies of the lacom	RT PAYMENTS. ss collect SALES TAX?? es of proof of payment of Sacopies of your FEDERAL Tast two (2) years. Husba of both spouses' tax returns URANCE ide COPIES, not originals, of the collision liability insurance b) wo see d) liquor liability insurance	Yes No les & Use Taxes for the AX RETURNS (personds/wives filing sepa for the last two (2) y f proof of the following rker's compensation in the e) real and/personal er E, not originals, of the strequired for your buse	ne last two (2) quarters. Inal and business/corpor rate returns must provears. g: asurance I property insurance following: iness explain

12. FINANCIAL STATEMENTS

If your business has completed and provided any financial statements to others (i.e., banks, lending institutions, etc.) within the two years preceding the filing of the petition including, but not limited to, balance sheets, income statements, and cash flow statements, please provide copies of those statements.

* Please indicate the name of the third party which received copies of these financial statements and why financial statements were provided to them.

_	loyees, does your business have a pension, 401(k), profit-sharing or other retirement (s)? □ Yes □ No
If yes	s, please complete the following information:
1)	Type of plan
2)	Name(s) of the trustee(s) of the plan
3)	Name(s) of the plan administrator
45	
4)	Location of funds

PLEASE READ THE FOLLOWING INFORMATION AND THEN SIGN AND DATE WHERE INDICATED:

YOUR RESPONSIBILITY AS A BUSINESS DEBTOR

- If you have borrowed money from any creditor and as security or collateral for the loan you have pledged accounts, rents, or other cash, you may not use the accounts receivables, rents or cash without express written consent from the creditor, or an Order from the Court allowing the use. Failure to obtain creditor consent or an Order from the Court before using these assets may likely result in severe penalties.
- During the course of your Chapter 13 Petition, it is your responsibility to pay any state and federal taxes on time. Failure to do so may result in severe penalties.
- There are strict laws governing the use and disposal of toxic materials and wastes. The filing of your bankruptcy case does not eliminate your responsibility to comply with these laws, you and only you will be held fully liable and responsible. If you are now in violation of these laws, you must immediately cease and desist any continued violation, and immediately correct any violations. If you are aware of any problems or violations, or potential problems or violations in this area, you must immediately notify the United States Trustee, the Chapter 13 Trustee, and your attorney.

- In order to continue the operation of your business, it is your responsibility to obtain and maintain comprehensive liability insurance for the operation of your business.
- If you are leasing commercial space, you must assume or reject your lease through the U. S. Bankruptcy Court within sixty (60) days after you filed your petition for bankruptcy, or your lease will be terminated automatically by operation of law.
- It is your responsibility to keep accurate records for your business and to provide the Trustee with such information as the Trustee may require both before and after confirmation.

If you have not already discussed the above issues with your attorney, immediately contact your attorney as these matters are extremely important. Do not contact the Trustee's office.

I/we have read and acknowledge receipt of the information regarding business debtor(s)' responsibilities. I/we certify that the foregoing information and attached documentation is true and correct to the best of my/our knowledge and belief. If this information is willfully false, I/we understand that I am/we are subject to punishment.

Date:	
	Debtor (Husband & wife must both sign if this is a joint bankruptcy case.)
Date:	
	Debtor