

Appointment Check List

We will need you to provide the following documents with this application:

1. Please **include** a photo copy of **ONE** of the following documents showing your legal name and birth date **with this application form**. Please bring original to next appointment.
 - a. **Canadian birth certificate, if you have one please use this, if you do not have one please bring one of the following documents**
 - b. Canadian Citizenship Card
 - c. Canadian Permanent Resident Card
 - d. Canadian Landed Immigrant Card
 - e. Other Similar Foreign identification documents

If you do not have any of these documents please call our office at 905-566-9096.

2. Proof of Income. Please bring in **ONE** of the following **with this application** (copies are acceptable):
 - a. Pay Stub
 - b. Prior year's tax return or Notice of Assessment
 - c. T4 or equivalent
 - d. Bank statements

3. A current statement for any investments, RESP, RRSP, and/or RSP

You will need to bring the following information to your next appointment when you will be signing your documents:

1. Any legal documents relating to wage garnishees or other ongoing legal matters.
2. If you are signing a Proposal you **MUST** bring in a **\$200** deposit when you come in to sign your documents.

You may not be able to sign your bankruptcy/proposal documents at your next appointment if we do not have all the required information. Make sure you provide all information on these forms and bring all requested documents.

Thank You

Ralph Culp and Associates Inc.

DEBTS / LIABILITIES

Creditor names & addresses	Applicant	Spouse	Joint	Comments	Business / Personal
Account #					P / B
	\$	\$	\$		
Account #					P / B
	\$	&	\$		
Account #					P / B
	\$	\$	\$		
Account #					P / B
	\$	\$	\$		
Account #					P / B
	\$	\$	\$		
Account #					P / B
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Account #					P / B
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Account #					P / B
	\$	\$	\$		
Account #					P / B
	\$	\$	\$		
Account #					P / B
	\$	\$	\$		
TOTALS	\$	\$	\$		

ASSETS

Assets	Applicant	Spouse
Cash on Hand	\$	\$
Accounts receivable	\$	\$
Household furniture and effects	\$	\$
Jewellery or personal effects	\$	\$
Cash value of insurance policies	\$	\$
Stocks/shares (include credit union)	\$	\$
Estimated tax refund	\$	\$
House / condo: Please provide recent tax bill and/or insurance policy	\$	\$
Registered owner of house / condo		
Land	\$	\$
Cottage	\$	\$
Automobile value	\$	\$
Make/model/year/mileage		
Recreation Vehicles/Equipment	\$	\$
Make/model/year/mileage		
Other motorized vehicle	\$	\$
R.R.S.P. - Please provide current statement	\$	\$
Amount Contributed in last 12 months (RRSP)	\$	\$
R.E.S.P. Amount - provide current statement	\$	\$
Profit sharing plan - provide current statement	\$	\$
Canada savings bonds - provide current statement	\$	\$
Collections - detailed list & valuation	\$	\$
Tools: Please attach a detailed list	\$	\$
Other (specify)	\$	\$

Additional comments / information:

Cause of financial problems:

EMPLOYMENT RELATED INFORMATION

Applicant's Employers		
Employer's Name & Address	Date Started	Date Ended

Spouse's Employers		
Employer's Name & Address	Date Started	Date Ended

Business owned by applicant(s)	
Applicant / Spouse owned business?	YES / NO
Business name:	
Address:	
Type of ownership:	
Type of business:	
When business started:	
When ceased operations:	
Debts incurred in business:	
Assets:	
% of debts from business	
Financial statements / tax returns	
Previously in receivership?	YES / NO
Date of receivership:	
Name of receiver:	

Verification of Income:

You need to provide proof of your Income. Please provide one of the following as proof of income:

1. Pay Stub
2. Prior Year tax return or notice of assessment
3. T4 or equivalent
4. Bank Statements

DEBT INFORMATION

Loans co-signed or guaranteed by applicant(s) YES / NO
Lender's name:
Address:
Borrower's name:
Address:
Is the party bankrupt? YES / NO

Business or personal debt? YES / NO
Type of business:

Has the applicant or spouse and debts arising from:	Applicant		Spouse		Comments
Fine or penalty imposed by court?	Y	N	Y	N	
Recognizance or bail bond?	Y	N	Y	N	
Alimony?	Y	N	Y	N	
Maintenance of affiliation order?	Y	N	Y	N	
Maintenance of support of separated family?	Y	N	Y	N	
Fraud?	Y	N	Y	N	
Embezzlement?	Y	N	Y	N	
Misappropriation?	Y	N	Y	N	
Defalcation while acting in a fiduciary capacity?	Y	N	Y	N	
Property obtained by false means / fraud?	Y	N	Y	N	
Student loans?	Y	N	Y	N	

Have you ever been declared bankruptcy or made a consumer proposal?	
Applicant Y / N	Spouse Y / N
Trustee's name	Trustee's name
Bankruptcy date	Bankruptcy date
Place filed	Place filed
Discharge date	Discharge date

TRANSACTIONS

	Applicant		Spouse	
	Y	N	Y	N
Have you disposed of / transferred assets in the last 12 months? i.e. Property or RRSP's? Details:				
Have you made any excess payments to creditors in the last 12 months? Details:				
Have you had any assets seized by creditors in the last 12 months? Details:				
Have you sold / disposed of / transferred real estate in the past 5 years? Details:				
Have you made arrangements to continue to pay any creditors? Details:				
Have you been or are you involved in civil litigation from which you may receive monies or property? Details:				
Are you anticipating any lump sum of money within the next year? Details:				

Income tax information:
 What is the last year you filed an income tax return?

Bank account information

1. Bank:

Address:

Account number:

Is this a joint account? YES / NO

2. Bank:

Address:

Account number:

Is this a joint account? YES / NO

INCOME AND EXPENSE

MONTHLY INCOME

	APPLICANT	SPOUSE	OTHER
Net employment income	_____	_____	_____
Net pension/Annuities	_____	_____	_____
Net child support	_____	_____	_____
Net child tax benefit	_____	_____	_____
Net spousal support	_____	_____	_____
Net employment insurance benefits	_____	_____	_____
Net social assistance	_____	_____	_____
Self employment income:	_____	_____	_____
Gross	_____	_____	_____
Net	_____	_____	_____
Other net income	_____	_____	_____
TOTAL NET	_____	_____	_____
TOTAL FAMILY INCOME	_____	_____	_____

MONTHLY NON-DISCRETIONARY EXPENSES

	APPLICANT	SPOUSE	OTHER
Child support payments	_____	_____	_____
Spousal support payments	_____	_____	_____
Child care	_____	_____	_____
Medical condition expenses	_____	_____	_____
Fines/Penalties imposed by the court	_____	_____	_____
Expenses as a condition of employment	_____	_____	_____
Debts where stay has been lifted	_____	_____	_____
Other expenses	_____	_____	_____
TOTAL NON-DISCRETIONARY	_____	_____	_____
TOTAL FAMILY NON-DISCRETIONARY EXPENSES	_____	_____	_____

MONTHLY DISCRETIONARY EXPENSES

Housing expenses	Living expenses	
Rent/Mortgage	Food/Grocery	_____
Property taxes/Condo fees	Laundry/Dry cleaning	_____
Heating/Gas/Oil	Grooming/Toiletries	_____
Telephone	Clothing	_____
Cable	Transportation expenses	
Hydro	Car lease/Payments	_____
Water	Repair/Maintenance/Gas	_____
Furniture	Public transportation	_____
Personal expenses	Insurance expenses	
Smoking	Vehicle	_____
Alcohol	House	_____
Dining/Lunches/Restaurants	Furniture/Contents	_____
Entertainment/Sports	Life insurance	_____
Gifts/Charitable Donations	Payments	
Allowances	To the estate/proposal	_____
Non-recoverable medical expenses	To secured creditor	_____
Prescriptions	Other expenses	_____
Dental		_____
	TOTAL INCOME	_____
	TOTAL DISCRETIONARY EXPENSES	_____
	INCOME - EXPENSES = SURPLUS OR (DEFICIT)	_____

HAVE YOU RECORDED ALL INCOME EARNED BY ALL MEMEBERS IN YOUR HOUSEHOLD? YES / NO