



How did you hear about SPERGEL? (check all that apply)

Website/Google/Internet TV Ad Radio YP 411.ca Referral Name _____

What words did you search for on the internet? _____

Family Information

	Debtor	Spouse
Family Name (Last Name)		
First and Middle Names (as printed on your birth certificate)		
AKA/Maiden Name		
Date of Birth	Day: Month: Year:	Day: Month: Year:
SIN #		
Marital Status	Single _____ Married _____ Separated _____	Widowed _____ Common-Law _____ Divorced _____ Other (_____) _____
Since	Day: Month: Year:	
Level of Education	___ 0-8 yrs ___ some high school ___ high school grad ___ some post-secondary ___ post-secondary certificate/diploma ___ university degree ___ refuses / don't know	___ 0-8 yrs ___ some high school ___ high school grad ___ some post-secondary ___ post-secondary certificate/diploma ___ university degree ___ refuses / don't know
Email		
Telephone Number	Home: Work:	Cell:
Address (including postal code)		
At this address since?	Day: Month: Year:	

List of Dependants Currently Living With You

Full Name	Relation	Date of Birth (dd/mm/yy)	Gender (M/F)	Income

Employment Information

Please indicate your current source of income (if unemployed, please indicate if you are currently collecting benefits)		
Debtor		
Employer	Occupation	
Address (incl Postal Code)	Email	Employed From (dd/mm/yy)
Name of Payroll Contact (to stop garnishment)	Phone Number	Fax Number

Please indicate your current source of income (if unemployed, please indicate if you are currently collecting benefits)		
Spouse (if also filing)		
Employer	Occupation	
Address (incl Postal Code)	Email	Employed From (dd/mm/yy)
Name of Payroll Contact (to stop garnishment)	Phone Number	Fax Number

Self-Employed or Business Details

Are you currently self-employed or have you operated a business in the last 5 years? Yes ___ No ___ If Yes, please complete below		
Business Name and Address (incl Postal Code)		
Type of Ownership: Incorporated ___ Partnership ___ Sole Proprietor ___		
Type of Business:	Commenced operating: Month ___ Year ___ Ceased operating: Month ___ Year ___ Check here if business is still operating _____	
Name of Partners or Directors (if applicable)		
Does the business have any assets and/or receivables? Yes ___ No ___ (If yes, please attach list)		
Was the Business GST Registered?	Yes ___ No ___	If yes, GST Number:
Did/does the Business have employees	Yes ___ No ___	Were all source deductions remitted? Yes ___ No ___
Can you produce books & records?	Yes ___ No ___	If no, what happened to them?



ASSETS

	Debtor Spouse Joint	D S J	Description (serial #, account #, location)	Estimated Net Value	Exempt (Y/N)	Secured (Y/N)
Cash on hand/in bank						
Household Furnishings						
Personal Effects						
Cash surrender value of insurance policies						
Stocks/Shares						
Pension Plans						
RRSP						
R.E.S.P.						
Canada Savings Bonds						
Profit Sharing Plan						
Real Estate (in Canada or elsewhere)						
House						
Land/Cottage						
Time Share						
Rental/Business prop.						
Motorized Vehicles (year, make, model)						
Auto # 1						
Auto # 2						
Truck(s)/Van(s)						
Motorcycle						
Snowmobile/other						
Boat/Motor/Trailer						
Recreational Vehicle						
Tools of Trade						
Other (specify (Collections, etc.)						



LIABILITIES / DEBTS

			Debtor (D) Spouse (S) Joint (J)	Business (B) Personal (P)	Comments
CREDITOR NAME AND ADDRESS		AMOUNT			
1			D	B	
			S	P	
			J		Asset Secured
	AC #				
2			D	B	
			S	P	
			J		Asset Secured
	AC #				
3			D	B	
			S	P	
			J		Asset Secured
	AC #				
4			D	B	
			S	P	
			J		Asset Secured
	AC #				
5			D	B	
			S	P	
			J		Asset Secured
	AC #				
6			D	B	
			S	P	
			J		Asset Secured
	AC #				
7			D	B	
			S	P	
			J		Asset Secured
	AC #				



LIABILITIES / DEBTS

			Debtor (D) Spouse (S) Joint (J)	Business (B) Personal (P)	Comments
CREDITOR NAME AND ADDRESS		AMOUNT			
8			D	B	
			S	P	
			J		Asset Secured
	AC #				
9			D	B	
			S	P	
			J		Asset Secured
	AC #				
10			D	B	
			S	P	
			J		Asset Secured
	AC #				
11			D	B	
			S	P	
			J		Asset Secured
	AC #				
12			D	B	
			S	P	
			J		Asset Secured
	AC #				
13			D	B	
			S	P	
			J		Asset Secured
	AC #				
14			D	B	
			S	P	
			J		Asset Secured
	AC #				

TOTAL DEBT: Debtor \$ _____ Spouse \$ _____ Joint \$ _____

Joint Debt > 75%: Yes ___ No ___ Yes ___ No ___ Yes ___ No ___

INCOME <i>*Please provide proof of anything entered in this section (ie. Pay stubs, etc)</i>	Debtor	Spouse	Total
Net Employment Income	\$	\$	\$
Pension/Annuities	\$	\$	\$
Support Received	\$	\$	\$
Baby Bonus/CTB	\$	\$	\$
Employment insurance benefits	\$	\$	\$
Social Assistance	\$	\$	\$
Self Employment Income: Gross _____	\$	\$	\$
Net: _____	\$	\$	\$
Other Income (provide details): _____	\$	\$	\$
Net Monthly Income	\$	\$	\$

SUPPORT, CHILD CARE, MEDICAL & OTHER EXPENSES

<i>*Please provide proof of anything entered in this section (ie. Receipts for child care, etc)</i>	Debtor	Spouse	Total
Child Support	\$	\$	\$
Spousal Support	\$	\$	\$
Child Care	\$	\$	\$
Medical Expenses	\$	\$	\$
Court Imposed Fines	\$	\$	\$
Employment Expenses	\$	\$	\$
Total	\$	\$	\$

LIVING EXPENSES

<i>Housing Expenses</i>		<i>Living Expenses</i>	
Rent/Mortgage	\$	Food/Groceries	\$
Property Taxes/Condo Fees	\$	Laundry/Dry Cleaning	\$
Heat/Gas/Oil	\$	Grooming/Toiletries	\$
Telephone/Cell phone	\$	Clothing	\$
Cable/Internet	\$	Other	\$
Hydro	\$	<i>Transportation</i>	
Water	\$	Car Leases/Payments	\$
Furniture	\$	Repairs/Maintenance/Gas	\$
Other	\$	Public Transportation	\$
<i>Personal Expenses</i>		<i>Insurance Expenses</i>	
Smoking	\$	Vehicle	\$
Alcohol	\$	House	\$
Dining/Lunches/Restaurants	\$	Furniture/contents	\$
Entertainment/Dining out	\$	Life insurance	\$
Gift/Charitable Donations	\$	<i>Payments</i>	
Allowances	\$	To the estate	\$
<i>Other non-recoverable medical expenses</i>		To secured creditors	\$
Prescriptions	\$		
Dental	\$		
Other	\$		
Total Monthly discretionary expenses (family unit).....			\$



Recent Transactions

<p>In the past twelve months, have you sold, disposed or transferred any assets? (including real estate, vehicles, RRSP's, RESP's, GIC's, Canada Savings Bonds, etc)</p> <p>If yes, specify date, asset, how much money you received, and what you did with the money:</p>	<p>(D)</p> <p>Y</p> <p>N</p>	<p>(S)</p> <p>Y</p> <p>N</p>
<p>In the last twelve months, have you made excess payments to creditors, or paid off in full any creditor?</p> <p>If yes, specify date, creditor paid, and the amount of the payment:</p>	<p>(D)</p> <p>Y</p> <p>N</p>	<p>(S)</p> <p>Y</p> <p>N</p>
<p>In the last twelve months, have you had any assets seized by creditors?</p> <p>If yes, provide date seized, description of asset, and creditor who seized the asset:</p>	<p>(D)</p> <p>Y</p> <p>N</p>	<p>(S)</p> <p>Y</p> <p>N</p>
<p>In the last five years, <i>while knowingly insolvent</i>, have you sold or transferred any property in Canada or elsewhere?</p> <p>If yes, specify asset, approximate date, amount received, and what you did with the money:</p>	<p>(D)</p> <p>Y</p> <p>N</p>	<p>(S)</p> <p>Y</p> <p>N</p>
<p>Within the last five years, have you made any gifts to others over \$500?</p> <p>If yes, provide when the gift was made, to whom the gift was made, and the value of the item:</p>	<p>(D)</p> <p>Y</p> <p>N</p>	<p>(S)</p> <p>Y</p> <p>N</p>
<p>Has anyone left you an inheritance which you have not yet received, or are you expecting to receive sums of money which are not related to your normal income or any other property within the next twelve months?</p> <p>If yes, provide details:</p>	<p>(D)</p> <p>Y</p> <p>N</p>	<p>(S)</p> <p>Y</p> <p>N</p>



GENERAL INFORMATION

<p>Within the last 6 months, have you paid for advice regarding your financial situation?</p> <p>If yes, provide the date, the name of the company, and how much you paid:</p>	<p>(D)</p> <p>Y</p> <p>N</p>	<p>(S)</p> <p>Y</p> <p>N</p>
<p>Have you ever been bankrupt before or filed a consumer proposal?</p> <p>If yes, provide the name of the Trustee, year filed, and the name you filed under if different than your current name:</p>	<p>(D)</p> <p>Y</p> <p>N</p>	<p>(S)</p> <p>Y</p> <p>N</p>
<p>Have you obtained new credit in the last three months, or have you used credit cards in the last three months?</p> <p>If yes, provide details:</p>	<p>(D)</p> <p>Y</p> <p>N</p>	<p>(S)</p> <p>Y</p> <p>N</p>
<p>Do you still have any credit cards in your possession? (Must be given to Trustee)</p>	<p>(D)</p> <p>Y</p> <p>N</p>	<p>(S)</p> <p>Y</p> <p>N</p>
<p>Has anyone co-signed for any of your debts, or have you co-signed a debt for someone?</p> <p>If yes, provide details:</p>	<p>(D)</p> <p>Y</p> <p>N</p>	<p>(S)</p> <p>Y</p> <p>N</p>
<p>Are there any writs, judgments, garnishments or wage assignments against you?</p> <p>If yes, provide details and supporting documentation:</p>	<p>(D)</p> <p>Y</p> <p>N</p>	<p>(S)</p> <p>Y</p> <p>N</p>
<p>Do you bank with a financial institution to which you owe money (including overdrafts, credit cards, lines of credit), or do you have any automatic deposits or post dated cheques for debt payments?</p> <p>If yes, provide details:</p>	<p>(D)</p> <p>Y</p> <p>N</p>	<p>(S)</p> <p>Y</p> <p>N</p>



Do you have a safety deposit box?	(D)	(S)
If yes, please describe the contents and value:	Y	Y
	N	N
Do you have any debts arising from court fines, penalties, child support or alimony arrears, student loans or convictions of fraud?	(D)	(S)
If yes, what and how much?	Y	Y
	N	N
Are you involved in civil litigation from which you may receive monies or property?	(D)	(S)
If yes, please provide details:	Y	Y
	N	N
Are you bonded in your current position?	(D)	(S)
	Y	Y
	N	N
Have you made arrangements to continue to pay any creditors?	(D)	(S)
	Y	Y
	N	N
Does your spouse have any assets?	(D)	(S)
	Y	Y
	N	N
Have you given any post-dated cheques to anyone?	(D)	(S)
	Y	Y
	N	N
If renting, have you ever owned the property or does a family member own it?	(D)	(S)
	Y	Y
	N	N
Do you have any student loan debts?	(D)	(S)
	Y	Y
	N	N



Income Tax:

For which year was your last tax return filed? Refund received \$ _____
Amount owing \$ _____
Refund to come \$ _____

Cause of Financial Difficulty

Briefly describe what, in your opinion, caused your current financial problems.

I hereby certify that the information in the application is true and complete in every respect and fully disclose the state of my affairs.

Signature of Applicant or Debtor

Date

Express Consent to Email

SPERGEL would like to occasionally share financial tips and interesting, timely, and relevant industry updates and news with you via email. In order to provide these, we would like to get your express consent for this purpose only:

Signature of Applicant or Debtor: _____ Date: _____

Email Address: _____ *(please only fill out email address if signature is given above)*

SPERGEL collects, uses, and discloses personal information provided to us in accordance with our Privacy Policy which is available at www.spergel.ca. You can withdraw your consent at any time by contacting us at admin@spergel.ca or clicking the unsubscribe button located at the bottom of each communication.