

Name:					
D.O.B.:		Contact/team name:			
Application: ■ Single ■ Joint		Agency:			
Partner: (if applicable):		Agency address:			
Partner D.O.B.: (if applicable):		_			
Address:		Marshavahin anda numbav			
Address:		Membership code number:			
		Case reference number:			
<b>Dependent children:</b> Under 16: 16-18:		Date of statement:			
Other dependants:		Date of review: (if applicable):			
Number in household:		Employment: ■ Full-time ■ Part-time			
Number of vehicles in household:		Unemployed ■ Not working due to illness / disability			
Housing tenure:		Self-employed Retired Carer Student Other			
■ Owner ■ Mortgage ■ Tenant – private ■ Tenant –		Partner's employment: ■ Full-time ■ Part-time			
social ■ Living with parents ■ Other		<ul> <li>■ Unemployed ■ Not working due to illness / disability</li> <li>■ Self-employed ■ Retired ■ Carer ■ Student ■ Other</li> </ul>			
			THE SUITOR		
Overview	Amount	Please confirm you have considered (or	Tick to		
Overview	(£)	discussed with an adviser) the use of any	confirm		
Total income	£	assets to make lump sum payments			
Total outgoings	£	Please confirm that a monthly contribution	Tick to		
Savings contribution	£	to savings has been considered	confirm		
Debt admin fee (if applicable):	£	(or discussed with an adviser)			
Total available for priority creditors	£	Additional notes (e.g. reasons for debt, c	ircumstances,		
Total available for non-priority creditors	£	temporary situations)			
Monthly Income	_	e.g. Made redundant in June 2014 and was	out of work for 6		
Earnings	£	months			
Benefits and tax credits	£	e.g. Communications and leisure: Mobile	phone - client has		
Pensions	£	multiple family members abroad			
Other income	£				
Total income	£				
Monthly Outgoings: Fixed Costs					
Rent	£				
Mortgage	£				
Other secured loans	£				
Council tax / rates	£				
Other home and contents	£				
Gas	£				
Electric	£				
Other utility costs (e.g. coal, oil, calor gas)	£				
Water	£				
Care and health costs	£				
Transport and travel	£				
School costs	£				
Pensions and insurances	£				
Professional costs	£				
Other essential costs	£				
Total fixed costs	£				
Monthly Outgoings: Flexible Costs	C				
Communications and leisure	£				
Food and housekeeping	£				
Personal costs	£				
Total flexible costs	£				
Total monthly outgoings (fixed and flexible)	£				

## **Debts**

Priority Debts				Non-Priority Debts			
Creditor Example credit	organisation	Owed (£)	Offer £0.00	Creditor Example credit organisation	<b>Owed (£)</b>	CCJ	Offer
						_	
						-	
						_	
						_	
			_				
		_					
		_					
						_	
			_			-	
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			_				
						_	
						_	
			_			-	
	(tick if you have cont	tinued on poyt page)			ave continued	on nex	t page)
	(tick if you have continued on next page)		Total non-priority debts				
	Total priority debt	S		Token Payments			
This financial state	tement is an accurate re	ecord of the in	nformation	provided			
THIS III IAH CIAI SIA	tement is an accurate fe	scora or trie if	nomation	provid <del>e</del> d.			
Signed:					Date:		