

Please complete all sections applicable and return this form to:
drydensfairfax solicitors, Fairfax House, Merion St, Leeds, West Yorkshire, LS2 8BX

FINANCIAL QUESTIONNAIRE

1. PERSONAL DETAILS

Case Reference:	<input style="width: 100%;" type="text"/>									
Name :	<input style="width: 100%;" type="text"/>									
Address:	<input style="width: 100%; height: 60px;" type="text"/>									
Post Code:	<input style="width: 100%;" type="text"/>									
Telephone Home:	<input style="width: 100%;" type="text"/>									
Telephone Mobile:	<input style="width: 100%;" type="text"/>									
Email Address:	<input style="width: 100%;" type="text"/>									
Date of Birth:	<input style="width: 20px;" type="text"/> d	<input style="width: 20px;" type="text"/> d	-	<input style="width: 20px;" type="text"/> m	<input style="width: 20px;" type="text"/> m	-	<input style="width: 20px;" type="text"/> y	<input style="width: 20px;" type="text"/> y	<input style="width: 20px;" type="text"/> y	<input style="width: 20px;" type="text"/> y
Home Owner:	YES / NO									
Owned:	Sole / Joint									
Mortgage Type:	Repayment / Endowment									
No. of people in household:	Adults:	<input style="width: 20px;" type="text"/>	Children under 14:	<input style="width: 20px;" type="text"/>	Children over 14:	<input style="width: 20px;" type="text"/>				
Status:	Married	Single	Separated	Living with Partner	Living with Parents					

2. EMPLOYMENT DETAILS

Employer's Name:	<input style="width: 100%;" type="text"/>			
Employer's Address:	<input style="width: 100%; height: 60px;" type="text"/>			
Employer's Post Code:	<input style="width: 100%;" type="text"/>			
Work Telephone:	<input style="width: 100%;" type="text"/>			
Time at Employer:	<input style="width: 100%;" type="text"/>			
Job Title:	<input style="width: 100%;" type="text"/>			
Nature of Business:	<input style="width: 100%;" type="text"/>			
Work Type:	Temporary	Permanent	Self Employed	
Paid:	Weekly	Monthly		
Hours Worked Per Week:	<input style="width: 100%;" type="text"/>			
Pay Date:	<input style="width: 100%;" type="text"/>			

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3. IMPORTANT INFORMATION

What is the reason for your difficulties/arrears/missed payments?

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Are you up to date with your priority bills?

Type	In arrears?	Amount of arrears	Repayment arrangement in place?
Mortgage	YES / NO	£	YES / NO
Rent	YES / NO	£	YES / NO
Council Tax	YES / NO	£	YES / NO
Gas	YES / NO	£	YES / NO
Electricity	YES / NO	£	YES / NO
Water	YES / NO	£	YES / NO

4. INCOME DETAILS

Income Calculated For:

You / Household

Income Worked Out:

Weekly / Monthly

Income:

Take Home Salary

£

Bonuses

£

Overtime

£

State Benefits:

Child Benefit

£

Single Parents Benefit

£

Unemployment Benefit

£

Local Housing Allowance

£

Disability Living Allowance

£

Personal Independence Payment

£

Other State Benefit

£

Other Income:

Housekeeping Received

£

Maintenance Received

£

Pension/s Received

£

Rental Income

£

Other (please specify on the right)

£

Other (details)

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Total £

£

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5. PRIORITY EXPENDITURE

The expenditure must be calculated at the same level and frequency as in section 4 (i.e you/household, weekly/monthly).

Outgoings:	Regular Payment	Arrears Payment	Other (details)	
Mortgage	£	£		
Any second mortgage	£	£		
Rent	£	£		
Ground Rent/Service Charge	£	£		
Council Tax	£	£		
Gas	£	£		
Electricity	£	£		
Housekeeping	£	£		
Water	£	£		
Secured Loans	£	£		
Court orders/fines	£	£		
Hire purchase/conditional sale	£	£		
Car finance	£	£		
Telephone	£	£		
Mobile phone	£	£		
TV Licence	£	£		
Home Insurance	£	£		
Life Insurance	£	£		
Health Insurance	£	£		
Mortgage Insurance	£	£		
Car Insurance	£	£		
Car tax/servicing/MOT	£	£		
Petrol	£	£		
Travel (bus, train, taxi)	£	£		
School fees	£	£		
Childcare costs	£	£		
Child maintenance/support	£	£		
Other (please specify on the right)	£	£		
Total	£	£		

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7. FINANCIAL SUMMARY

Total Income (section 4)

£

Total Priority Expenditure (section 5)

£

Total Other Expenditure (section 6)

£

Disposable Income *

£

** If your total income (section 4) is £1,000 and your priority expenditure (section 5) is £600 and other expenditure is £300 then your disposable income will be calculated as £100.*

8. PAYMENT OFFER

My offer of payment towards this account is:

£

Per Week / Month

My preferred method of payment is:

Direct Debit		*
Standing Order		
Debit Card / Credit Card		*
Postal Order		
Bank Giro		
Cheque		

A contact telephone number **must be supplied in section one.*

Please advise if you are subject to any ongoing legal enforcement proceedings and provide details.

Are there any exceptional circumstances that you would like us to consider when reviewing your offer?

This form does not constitute a payment arrangement. Your offer will be considered at our earliest possible opportunity.

Whilst we assess your financial details, it is essential that any previous arrangements agreed are kept to in order to prevent any further action taking place.

Signed: _____

Date: _____