

Mid Bedfordshire Citizens Advice Bureau

Dealing with your debts

Authorised and regulated by the Financial Conduct/ Authority
FRN: 617668



You have been given this pack as you may qualify for assistance from our Money Advice Service. **We will not be able to confirm whether we can provide assistance unless ALL of the following is done:**

Step 1

Fully complete this form and sign it. If you are part of a couple you both need to sign the Form of Authority on page 8 and the Client Consent on page 9. If you do not complete these in full, we may not be able to negotiate your creditors

Step 2

Provide Proof Of Income For The Household:

- Employed? If you work, we will need up to date wage slips.
- Receiving Benefits? We will need all recent letters from the Benefits Agency and a Bank Statement detailing the payments received.
- Any other income? This includes private pensions, self employed earnings, money from grown up children living at home, and also any other income that doesn't fit anywhere else.

Step 3

Provide Proof of Expenditure

- Rent book or mortgage statement
- Latest letters/statements from your creditors including court action letters/forms.

Step 4

Please return the completed pack to the bureau

Please bring the completed pack back to the **Amphill Bureau** between 10.00 am and 2.30 pm, Monday to Friday or to the **Biggleswade Bureau** between 10.00 am and 2.30 pm Monday to Thursday

Client use	Bureau use

Amphill Citizens Advice Bureau
10 Bedford Street
Amphill
MK45 2NB

Biggleswade Citizens Advice Bureau
Century House
Market Square
Biggleswade
SG18 8UU

PETRA Reference: _____	
Issued by: _____	Date Issued: ____ / ____ / 2014

Not all of the items on the sheet will apply to you so it is quicker to fill in than it may first appear. Completing as much of the form as you can before your appointment will enable us to help you prepare a short financial statement to give to your creditors as soon as possible.

It is not necessary to put a figure in every column. Where possible show a monthly figure against your items of income and expenditure. If this is not possible put the amount in the weekly, quarterly or annual column as appropriate.

Client(s) Name(s)	
Case Reference	
Date	
Employment Status (unemployed, full/part-time etc)	
Number in household	
Age of children	
No of vehicles in household	

INCOME	Weekly	Monthly	Quarterly	Annually	Adviser's Use
Salary or wages					
1 Client's salary or wages (take home)					
2 Partner's salary or wages (take home)					
3 Other income					
4 Other income					
4a Total Salary or wages (1 to 4)					
Other income					
5 Maintenance/Child Support					
6 Boarders/Lodgers etc					
7 Non-dependant contributions					
8 Student loans and grants					
9 Other					
9a Total Other Income (5 to 9)					
Benefits					
10 Jobseekers Allowance (income based)					
11 Jobseekers Allowance (contribution based)					
12 Income Support					
13 Working Tax Credit					
14 Child Tax Credit					
15 Child Benefit					
16 Incapacity Benefit/SSP					
17 Disability Living Allowance/Attendance Allowance					
18 Carers' Allowance					
19 Housing Benefit					
19a Council Tax Benefit					
20 Other (eg Maternity Allowance/SMP)					
21 Other					
21a Total Benefits (10 to 21)					
Pensions					
22 State pension(s)					
23 Private or work pension(s)					
24 Pension Credit					
25 Other					
25a Total pensions (22 to 25)					
25b TOTAL INCOME (4a + 9a + 21a + 25a)					

ASSETS		
House/Flat	Equity	Notes
26 Total value of property(ies)		
27 Mortgage outstanding		
28 Secured loan(s) outstanding		
28a Total Equity (26 – 27 - 28)		
Other Assets		
29 Value of vehicle(s) (less HP outstanding)		
30 Savings		
31 Other assets		
31a Total Other Assets (29 to 31)		
31b Total Equity and Assets (28a + 31a)		

EXPENDITURE	Weekly	Monthly	Quarterly	Annually	Adviser's Use
Essential Expenditure					
32 Rent					
33 Ground Rent & service charges					
34 Mortgage					
35 Other secured loans					
36 Mortgage Endowment and MPPI					
37 Building and contents insurance					
38 Pension and Life Assurance					
39 Council Tax					
40 Gas					
41 Electricity					
42 Water					
43 Other utilities (coal, oil, calor gas)					
44 TV Licence					
45 Magistrates' Court Fines					
46 Maintenance/Child Support					
47 Hire Purchase or Conditional Sale					
48 Childcare costs					
49 Adult care costs					
50 Other					
51 Other					
52 Other					
52a Total Essential Expenditure (32 to 52)					
Phone					
53 Home Phone					
54 Mobile Phone					
55 Other					
55a Total Phone (53 to 55)					

	Weekly	Monthly	Quarterly	Annually	Adviser's Use
Travel					
56 Public transport (eg work, shopping, school)					
57 Other (eg taxis)					
58 Car Insurance					
59 Road Tax					
60 Fuel (petrol, diesel, oil etc)					
61 MOT and car maintenance					
62 Breakdown/Recovery					
63 Parking Charges/Tolls					
64 Other car costs					
64a Total Travel (56 to 64)					
Housekeeping					
65 Food and milk					
66 Cleaning/Toiletries					
67 Newspapers/Magazines					
68 Cigarettes/Tobacco					
69 Alcohol					
70 Laundry/Dry Cleaning					
71 Clothing/Footwear					
72 Nappies and baby items					
73 Pet food					
74 Other					
74a Total Housekeeping (65 to 74)					
Other Expenditure					
75 Health (dentist, glasses, prescriptions, health insurance)					
76 Repairs/house maintenance (incl window cleaning, maint. contracts)					
77 Hairdressing/Haircuts					
78 Cable, satellite & internet					
79 TV, video, other appliance rental					
80 School meals and meals at work					
81 Pocket money and school trips					
82 Lottery and pools etc					
83 Hobbies/leisure/sport (incl pub/outings gym etc)					
84 Gifts (eg Christmas, birthdays, charity etc)					
85 Vet's bills/Pet insurance					
86 Other (eg postage)					
87 Other					
87a Total Other Expenditure (75 to 87)					
87b TOTAL EXPENDITURE (52a+55a+64a+74a+87a)					

CREDITOR SHEET 1 – PRIORITY DEBTS

DEBT	Arrears (£)	Payment offer	Wk/Mnth/ Qrt/Annual	Comments
Rent				
Mortgage				
Other secured loans				
Magistrates Court fines				
Council Tax				
Maintenance / Child Support				
Gas				
Electricity				
Hire purchase / conditional sale				
Other				
Total				
Available income for other creditors				

CREDITOR SHEET 2 – OTHER DEBTS

CREDITOR	Type of Debt (Overdraft, Personal)	Balance o/s (£)	Last Known Date of Arrears	CCJ	Payment Offer (£)	Comments
Total						



Mid Bedfordshire Citizens Advice Bureau

Form of Authority

Statement and Declaration

Please read this page, and then sign the declaration at the bottom of the page.

Declaration of Authority

I authorise Mid Bedfordshire Citizens Advice Bureau to act, assist, deal and negotiate on my behalf and to take up enquires with third parties and receive information on my behalf about my affairs.

I give my consent for Mid Bedfordshire Citizens Advice Bureau to record personal information about me.

Name: _____

Address: _____

Signature: _____

Partner (if applicable)

Name: _____

Signature: _____

Date: ____ / ____ / ____



Mid Bedfordshire CAB Client Consent – MAS Debt Advice Project

Permission to share your data with The Money Advice Service

The debt advice service that we provide you for free is funded by the Money Advice Service (MAS). MAS, or an agency appointed by MAS, may wish to contact you in the future to find out what you thought of the service you received here. This helps us to improve our service for others. In order for MAS to be able to do this we need your permission to transfer your contact details to MAS. By ticking yes you understand that you may be contacted by telephone, email or letter and invited to share your thoughts about our service. If you do not wish to participate you are able to opt out by ticking no. Whichever option you choose will not alter the advice and service you receive.

- Yes I/We give my/our consent to the CAB service sharing my/our contact detail(s) with the Money Advice Service for the purposes of evaluating the service I/we receive.**
- No I/We do not give my/our consent to the CAB service sharing my/our contact detail(s) with the Money Advice Service for the purposes of evaluating the service I/we receive.**

Name:		
Signature:		Date:

Partners Name:		
Signature:		Date: