



LAW OFFICES OF MICHAEL LUPOLOVER, P.C.

BANKRUPTCY INTAKE FORM

Name: _____

Full Address: _____

Phone Number: _____

Occupation: _____

Total Monthly Gross Income: _____

Amount of Debt and Type of Debt (e.g. \$15,000 credit card; \$2,500 medical bills):

Do you own a home or rent? _____

If you own a home, how much is the outstanding mortgage (if any): _____

If you own a home, what is the approximate current value of the home: _____

Other than a home, if you have any other assets, please list them along with any outstanding amounts owed on those assets (e.g. \$500 savings account; \$15,000 car with \$10,000 outstanding loan):

**AFTER SUBMISSION, AN ATTORNEY WILL CONTACT YOU TO DISCUSS
BANKRUPTCY AND YOUR INDIVIDUAL SITUATION IN FURTHER DETAIL.**

Disclaimer: Please be advised that the completion of this Client Intake Form does not form an attorney-client relationship and is merely for evaluation purposes. A retainer agreement must be signed before the firm will represent you. Thank you.

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