

Statement of Affairs under Part XI



Australian Government

Australian Financial Security Authority

Bankruptcy Act 1966

Form 4 (SOA) 112013

Family name of deceased:	Office Use Only	Date Filed	
Given name(s) of deceased:	Administration Number		
<p>Do you need to complete this form?</p> <ul style="list-style-type: none"> If you are administering a deceased estate which is insolvent, you will need to complete this form. Parts of this form should be completed by you as though you were the deceased. 		<p>How to complete this form:</p> <ul style="list-style-type: none"> Please answer all questions. Please ensure that the information you provide is complete and accurate to the best of your knowledge in relation to the deceased's affairs. If there is insufficient space to provide full details, show additional information on a separate page. Attach the extra pages to this document. You must verify this form by affidavit. 	

What is this information used for?

A copy of this Statement of Affairs will be provided to the trustee of the deceased estate, who will use the information in it to administer the estate.

- Part A of this document will remain confidential and will not be available to the public.
- Part B contains information that will be available to the public. That information includes personal information which will be recorded on the National Personal Insolvency Index (NPII), a permanent record available to the public established by the Bankruptcy Regulations. Those details include the type of administration, the name of the deceased (including previous names and aliases), address (including the business address and previous addresses), date of birth and death and occupation of the deceased. These details, including details of the legal personal representative, provide a record of an individual's personal insolvency administration and assist in clearly identifying the deceased.
- Parts C, D and E form part of a public record and are available for public inspection. A summary of this information will be forwarded to the creditors of the deceased.

Translating and Interpreting Service

- If you do not speak English, phone 131 450 from anywhere in Australia for the cost of a local call.

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Statement of Affairs

Confidential PART A

About the deceased

- 1 If the deceased had a will, Yes
attach a copy of the will. No
- 2 If the deceased had a Yes
Testamentary Trust created No
under the terms of her or his
will, attach a copy of the trust
document

- 3 What language do you, as the legal personal representative, most commonly use?
- | | | | | | | | |
|----------|--------------------------|------------|--------------------------|---------|--------------------------|---------|--------------------------|
| English | <input type="checkbox"/> | Arabic | <input type="checkbox"/> | Greek | <input type="checkbox"/> | Serbian | <input type="checkbox"/> |
| Croatian | <input type="checkbox"/> | Vietnamese | <input type="checkbox"/> | Italian | <input type="checkbox"/> | Other | <input type="text"/> |

4 About the Deceased's Insolvency

What do you believe was the main cause of the deceased's insolvency? Place a tick in a box for either 4A or 4B that best describes the main cause of the deceased's financial difficulties.

A. Non Business Related

- Unemployment or loss of income
- Adverse legal action
- Liabilities due to guarantees
- Gambling, speculation & extravagance in living
- Ill health or absence of health insurance
- Domestic discord or relationship breakdowns
- Excessive use of credit facilities including losses on repossessions, high interest payments and pressure selling

B. Business Related

- Economic conditions affecting industry, including competition, credit restrictions, fall in prices or increases in costs
- Lack of business ability including underquoting or failure to assess potential of business
- Excessive interest payments on loan monies and capital losses on repayments
- Excessive drawings including failure to provide for taxation
- Inability to collect debts due to disputes, faulty work or bad debts
- Failure to keep proper books of account and costing records
- Lack of sufficient initial working capital
- Gambling or speculation
- Seasonal conditions including floods and drought

If other reason not listed please specify.

To the best of your knowledge when did the deceased first have difficulty paying their debts?

Month	<input type="text"/>	Year	<input type="text"/>
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5 Accountant

Did the deceased have an accountant? No Yes

↓ *please give details*

Firm Name	
Contact Person	
Address	
Phone No.	

6 Solicitor

Did the deceased have a solicitor? No Yes

↓ *please give details*

Firm Name	
Contact Person	
Address	
Phone No.	

7 Did the deceased have a spouse/partner? No Yes

↓ *please give details*

The deceased's spouse/partner's full name

8 Family Court Arrangements

Has the deceased been a party to an order or agreement made by the Family Court in relation to a property settlement? No Yes

↓ *date of the order*

--	--	--

Provide a copy of the agreement or order

Are there any proceedings currently before the Family Court involving the deceased? No Yes → *Provide a copy of the application*
(Do not include proceedings for custody of children)

9 Legal Actions

Was the deceased involved in any legal processes or disputes at the date of death? No Yes

↓ *please give details**

Plaintiff	Defendant	Court	Plaint No.

*Provide a copy of the summons, writ or any other legal documents or letters.

10 Proceeds of Crime Orders

Was the deceased, or her/his property, subject to a Proceeds of Crime Order or forfeiture application? No Yes

↓ *please give details**

Type of Order	Date of Order	Court	Court File No.

*Provide a copy of the proceeds of crime order, forfeiture order or pecuniary penalty order.

Any information provided from this point is available to the public.

Part B – Personal Details

11 About the deceased

Gender

Male

Female

Title

Mr

Mrs

Ms

Miss

Other

Family Name

Given Names

12 List all other names used by the deceased in the last 10 years

13 Date of birth of the deceased

14 Date of death

15 Did the deceased have a will?

Yes

No

16 Has probate been granted?

Yes

No

If yes, date probate granted

Probate File Number

Attach a copy of the Probate Certificate

17 Last known residential address of the deceased

Post Code

Did the deceased own or was the deceased purchasing this property

Yes

No

18 Previous 2 addresses of the deceased

1

Post Code

Did the deceased own or was the deceased purchasing this property

Yes

No

2

Post Code

Did the deceased own or was the deceased purchasing this property

Yes

No

19 Occupation

What was the deceased's usual trade or profession?

20 Has the deceased previously been bankrupt or entered into a formal arrangement with creditors?

No

Yes

What type of administration was it?

If more than twice please attach details

1 Bankruptcy <input type="checkbox"/> Part X Arrangement <input type="checkbox"/> Part IX Debt agreement <input type="checkbox"/> Year <input style="width: 100px;" type="text"/>	2 Bankruptcy <input type="checkbox"/> Part X Arrangement <input type="checkbox"/> Part IX Debt agreement <input type="checkbox"/> Year <input style="width: 100px;" type="text"/>
--	--

About the legal personal representative

21 Full Name of:
Legal Personal Representative:

Solicitor acting for you, if any:

22 Current residential address of Legal Personal Representative

	Post Code
--	-----------

23 Current postal address of Legal Personal Representative

	Post Code
--	-----------

24 Telephone numbers of:
Legal Personal Representative:

Solicitor acting for you, if any:

Home Work	Fax Mobile
Email	

25 How were you appointed as Legal Personal Representative ?

Executor

Administrator

Other

Details

Statement of Affairs

PART C

28 Corpus Account

Bank Name:	
Branch:	
Account No:	

Receipts			Payments		
Date of receipt	Particulars including name of payer	Amount received	Date of payment	Particulars including name of payee	Amount paid

Statement of Affairs

PART C

29 Expenses incurred by the legal personal representative that have not yet been paid. (Including testamentary expenses)

Date of expense	Type of expense	Name and address of the creditor to whom the expense is owed.	Amount of expense

Part D – Deceased’s Assets & Liabilities

The deceased’s name: Date of Birth:

30 Cash

How much cash did the deceased have at the date of their death? \$

31 Banks / Building Societies / Credit Unions

Did the deceased have any money in banks, building societies, credit unions or with other deposit takers? (do not include overdrawn accounts here)

No Yes

↓ please give details

Full Name of Organisation	Branch	Account Number or Account Type	Current Balance	Joint Account	
			\$	No <input type="checkbox"/>	Yes <input type="checkbox"/>
			\$	No <input type="checkbox"/>	Yes <input type="checkbox"/>
			\$	No <input type="checkbox"/>	Yes <input type="checkbox"/>
			\$	No <input type="checkbox"/>	Yes <input type="checkbox"/>

32 Tax Refund

Is the deceased estate expected to receive a tax refund? No Yes

Year Ended	Amount expected
30 June	\$
30 June	\$

33 Superannuation and Life Insurance Policies

List all superannuation funds and life insurance policies of the deceased.

Name of Fund	Nominated Beneficiary	Balance of Fund	Type of Fund		
		\$	Super	Life Insurance	
		\$	Super	Life Insurance	
		\$	Super	Life Insurance	

Has the deceased received a superannuation payout from any fund in the last 5 years? No Yes

Has the deceased made a lump sum payment to any superannuation fund in the last 5 years? No Yes

Do you expect the deceased estate to receive payment from any superannuation fund in the next 3 years? No Yes

34 Vehicles

Did the deceased own, or have an interest, in any vehicles? (This includes cars, motor bikes, trailers, caravans, campervans, boats)

No Yes

↓ please give details

Type of vehicle (eg car, boat)	Make, Model & Year	Regn Number	Estimated Resale Value	Amount Owed (if any)
			\$	\$
			\$	\$
			\$	\$

35 **Real Estate**

Did the deceased own, or was buying, any land or buildings in Australia or overseas?
This includes vacant land, house, unit, commercial property.

No

Yes → Give further details below

If the deceased owned more than one property, please copy this section and attach when completed.

Is there a building on the land?

No

Yes

↓ please give details

Type eg house/unit	
--------------------	--

What is the property address?

What is the estimated resale value of the property?

\$	
----	--

How much did the deceased owe to creditors who hold security over this property?

\$	
----	--

Are there any other owners?

No

Yes

↓ please give details

	Name	1	2
	Address		

Is the property vacant?

No

Yes

Did the deceased live in the property?

No

Yes

Does the deceased's partner live in the property?

No

Yes

Is the property rented to tenants?

No

Yes

↓ please give details

Gross rent per week	\$	
Name of person collecting rent		
Address		

Is the property subject to a life tenancy?

No

Yes

↓ please give details

Name of tenant	
----------------	--

Is the property listed for sale?

No

Yes

↓ please give details

Name			
Address			

Is the property insured?

No

Yes →

Expiry Date				
-------------	--	--	--	--

36 **Shares**

Did the deceased own, or are they entitled to any shares, options, rights convertible notes or other securities?

No Yes

↓ *please give details*

Name and address of Company	No. of shares	Shareholder Number	Date Acquired	Market Value
				\$
				\$
				\$
				\$

37 **Investments**

Did the deceased have any managed investments, insurance bonds, debentures or other investments?

No Yes

↓ *please give details*

Investment Type	Date Acquired	Market Value
		\$
		\$

38 **Money Owed to the deceased.**

Did the deceased have any debts owed to them? (including loans to friends and relatives, to family trusts or private companies)

No Yes

↓ *please give details*

Name & address of person who owes the deceased money	Amount owed	Amount likely to be received
	\$	\$
	\$	\$
	\$	\$
	\$	\$
	\$	\$
	\$	\$
	\$	\$

Statement of Affairs

39 Deceased Estate

Did the deceased have an interest in a deceased estate?

No Yes

Provide a copy of the will or letters from the executor

↓ *please give details*

Name of Deceased	Date of Death	Executor Name and Address	Estimated value of benefit
			\$
			\$

40 Sale, Transfer or Gift of Assets in the last 5 years

Has the deceased sold, transferred or given away any assets worth more than \$1000 in the last 5 years?

No Yes

Provide a copy of the receipt or settlement statement

↓ *please give details*

What did the deceased transfer or give away?	To whom was it sold, transferred or gifted?	Date of disposal	What was it worth?	How much did they receive?
			\$	\$
			\$	\$

41 Assets owned by the deceased which are in somebody else's possession

Did the deceased own any assets which were not currently in his/her possession at the date of death?

No Yes

↓ *please give details*

Description of asset	Who has the asset? Name and address	What is it worth?
		\$
		\$

42 Assets the deceased contributed towards or helped purchase

Has the deceased contributed or otherwise assisted in the purchase or improvement of any asset valued over \$1000 which is held by someone else (including their spouse)?

No Yes

↓ *please give details*

Description of asset	Who has the asset? Name and address	What did they contribute?	What is it worth?
		\$	\$
		\$	\$

43 **Other items of value**

Excluding the deceased's general household furniture, did they own any other assets or items of value?

No Yes

(eg jewellery, camera, artworks, antiques, copyrights)

↓ please give details

Description of Asset	Location of Asset	Estimated Resale Value	Jointly owned?
		\$	No Yes
		\$	No Yes
		\$	No Yes
		\$	No Yes

Please attach a list if you have more assets

44 **Assets/Money Paid to Creditors**

As a result of pressure for payment from creditors has the deceased, in the last 12 months, paid a total amount of more than \$1000 over and above their normal repayments or surrendered any assets to a creditor?

No Yes

↓ please give details

Date paid/surrendered	Type of asset (eg cash/house)	Value of asset	Name of Creditor
		\$	
		\$	
		\$	
		\$	

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PART D

45 Secured Creditors

A secured creditor is a creditor who holds a charge over the assets of the deceased as security for the debts owing by the deceased.

For example, a mortgage over the deceased’s house, a hire purchase/lease agreement over the deceased’s vehicle, a chattel mortgage or a bill of sale over the deceased’s business assets. Creditors who are not secured should be listed at Question 46.

Please copy this page if the deceased has more than 3 secured creditors.

	Secured Creditor No. 1	Secured Creditor No. 2	Secured Creditor No. 3
Creditor’s name	<input type="text"/>	<input type="text"/>	<input type="text"/>
Creditor’s postal address	<input type="text"/>	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>	<input type="text"/>
Account/Loan number	<input type="text"/>	<input type="text"/>	<input type="text"/>
Total amount owing to this creditor	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
Type of security (eg mortgage)	<input type="text"/>	<input type="text"/>	<input type="text"/>
Date the security was given	<input type="text"/>	<input type="text"/>	<input type="text"/>
Description of secured asset	<input type="text"/>	<input type="text"/>	<input type="text"/>
Location of asset	<input type="text"/>	<input type="text"/>	<input type="text"/>
Estimated resale value of the asset	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
Is it a joint loan?	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>
Are loan repayments up to date?	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>
Has the creditor repossessed the asset?	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>

There are penalties under the Bankruptcy Act for providing false or misleading information

Statement of Affairs

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Unsecured Creditors

An unsecured creditor is a creditor who does not hold security over any particular asset owned by the deceased.

Include all debts that have not already been listed as secured at Question 45. Debts include loans from friends and relatives.

(**Note.** Do not include debts incurred by the Legal Personal Representative or Executor in the administration of the deceased estate as they should be listed on page 9.)

Please copy this page if the deceased has more than 10 unsecured creditors.

Creditor Name	Full postal Address	Nature of debt	Account No.	Mth/Yr Incurred	Total amount owing	Joint debt?	
						No	Yes
1						No	
						Yes	
2						No	
						Yes	
3						No	
						Yes	
4						No	
						Yes	
5						No	
						Yes	
6						No	
						Yes	
7						No	
						Yes	
8						No	
						Yes	
9						No	
						Yes	
10						No	
						Yes	
TOTAL					\$		

There are penalties under the Bankruptcy Act for providing false or misleading information

Statement of Affairs

Part E – Business Details

The Deceased's Name Date of Birth

47 Sole trader/Partnership

Has the deceased been in business as a sole trader or in partnership at any time in the last 5 years?

No → Go to Question 48

Yes → Give further details below

If the deceased operated more than one business please copy this section and attach when completed.

Business Name
 Business Address

Is the business registered with the Australian Taxation Office for GST payments? No Yes

Did the deceased have an Australian Business Number? No Yes →

What is the nature of this business?

Partner's Name (if any)
 Partner's Address

Is there a written partnership agreement? (attach copy) No Yes

When did the business start operating?

Has the business ceased operating? No Yes → Date ceased

Has the deceased sold any business assets or sold the business as a going concern in the past 2 years? No Yes

↓ please give details

Business Name/Asset Description	Date Sold	Name of Purchaser	Amount Received
			\$
			\$
			\$

Are there any other business assets not sold? No Yes

↓ please give details

Type of Asset	Resale Value	Location of assets
Stock	\$	
Plant and Equipment	\$	
Fixtures and Fittings	\$	
Licences	\$	
Bank Accounts	\$	
Book Debts	\$	
Other (please describe)	\$	
	\$	
	\$	

Is any stock on consignment or subject to retention of title? No Yes

Is there a bill of sale or other security over business assets? No Yes → Provide a copy of the bill of sale

Did the deceased have a lease agreement over their business premises? No Yes ↓ please give details

Landlord's Name							
Landlord's Address							
Period of lease					to		

Has the deceased sold, or tried to sell the business? No Yes ↓ please give details

Agent's Name							
Agent's Address							
Asking Price	\$						

Who has the business records?

Name							
Address							
Phone No.							

Who prepares the business financial statement and tax returns?

Name							
Address							
Phone No.							

Statement of Affairs

48 Companies

Has the deceased been a director or had a management role in a company at any time in the last 5 years?

No → Go to Question 49

Yes → Give further details below

If the deceased has been involved in more than one company please copy this section and attach when completed.

Company Name			
ABN			
Registered Address			
Trading Name			
Nature of company activity			
Officeholder positions held by the deceased in the last 2 years	Director	<input type="checkbox"/>	Date resigned
	Secretary	<input type="checkbox"/>	Date resigned
	Other	<input type="checkbox"/>	Date resigned

Has a liquidator, receiver or administrator been appointed to manage the company?

No Yes

↓ *please give details*

Name			
Address			
Is a dividend or distribution expected?	No	<input type="checkbox"/>	Yes <input type="checkbox"/>

Does the company owe the deceased any wages, loans or any other money?

No Yes

↓ *please give details*

Description	Amount owed
	\$
	\$

Did the deceased own, or has the deceased at any time during the last 5 years owned any shares in this company?

No Yes

↓ *please give details*

No. of shares	Date sold	Transferee name and address	Sale proceeds
			\$
			\$

Has the deceased transferred any assets to the company in the last 5 years?

No Yes

↓ *please give details*

Description of asset	Date of transfer	Value of asset	Money received
		\$	\$
		\$	\$

Who prepares the financial accounts?

Name			
Address			
Phone No.			

49 **Trusts**

Has the deceased been a unit holder in or beneficiary of a trust in the last 5 years OR
 Has the deceased transferred any assets to a trust in the last 5 years?

No → Go to page 21

Yes → Give further details below

If the deceased has been involved in more than one trust please copy this section and attach when completed.

Trust Name

Principal activity

Type of trust Unit Discretionary Other

Trustee's Name

Trustee's Address

Are there assets owned by the trust? No Yes

↓ *please give details*

Asset Description	Resale Value
	\$
	\$

Does the trust owe the deceased any wages, loans or other money? No Yes

↓ *please give details*

Description	Amount owed
	\$
	\$

Has the deceased received any income or capital distribution from this trust in the last 2 years? No Yes

↓ *please give details*

How often do they receive a distribution	Date of last payment	Amount of last payment
		\$

Has the deceased transferred any assets to the trust in the last 5 years No Yes

↓ *please give details*

Description of asset	Date of transfer	Value of asset	Money you recd
		\$	\$
		\$	\$

Name and address of the person holding the trust deed, books of account and financial statements.

Name	<input style="width: 80%;" type="text"/>
Address	<input style="width: 80%;" type="text"/>
Phone No.	<input style="width: 80%;" type="text"/>
Email address	<input style="width: 80%;" type="text"/>

Statement of Affairs

STOP

CHECKLIST

- Please check that you have provided an answer to **every question**.
- Ensure you have attached a **copy of the deceased's will and certificate of Probate if applicable**.
- Attach all **other documentation** you have been asked to supply. A checklist is provided below:

Question	Document required	If not supplied, where can it be obtained?
2 Testamentary Trust	Testamentary Trust document	
8 Family court arrangements	Family Court order or application	
9 Legal actions	Summons, writ or other documents	
10 Proceeds of Crime Orders	Proceeds of Crime Order, forfeiture order or pecuniary penalty order	
39 Deceased estate	Copy of the will	
40 Sale, transfer or gift of assets	Property settlement statement	
47 Sole Trader/Partnership	Copy of written partnership agreement	
Security over business assets	Bill of sale	

Please ensure that all information you have provided is complete and correct as far as you are aware as the Legal Personal Representative of the deceased estate.

Any information you have provided may be cross-referenced with information the deceased has previously given to his/her credit providers.

Now sign the declaration on the next page

DECLARATION

Statement of Affairs

DECLARATION

Note: S267(2) of the Bankruptcy Act provides that a person must not sign a declaration that the person knows to be false.

Penalty: Imprisonment for 12 months.

**As the Legal Personal Representative, of,
I declare that, as far as I am aware, the particulars set out in this statement
are correct.**

Signature of legal representative of deceased

Date

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Print name in full

Surname	Given names

**If you received assistance completing this form, the person
providing the assistance should sign the statement below.**

To be completed by any person or interpreter who assisted a person to complete this form.

Signature

--

 Date

--	--	--

Full Name

--

Address

--

Reason the person required your assistance?

Statement of Affairs

NOTES: