

## **APPLICATION FORM FOR REHABILITATION**

## E-mail to annelie@insolvensies.co.za

Important documents needed					
Please indicate with a $\checkmark$ that the documents are attached					
Certified Copy of ID (not older than 3 months)					
Proof of address (not older than 3 months)					
Payslip (not older than 3 months)					

Applicant 1													
(If married in community of prop	perty	, cor	nple	te sp	ouse	e info	orma	tion	und	er A	pplic	ant	2
on next page):													
Who is your Curator?													
Date of sequestration?													
Your case number or Masters reference number?													
Full name:													
Surname:													
Referred to as:													
ID Number:													
Residential address: currently			•								•		
Residential address: <i>during</i> sequestration													
Postal address: (if different)													



							2	
Tel at home:								
Mobile number:								
Tel at work:								
E-mail address: (Private, we can use it)				•				
Profession: currently								
Profession: during sequestration								
Current Employer:								
Marital status: <i>currently</i>	In Community	ANC		Divo	rced	U	Inmarri	ed
Marital status: <i>during</i> sequestration	In Community	ANC		Divorced		U	Unmarried	
If married with <b>ANC</b> – husband/wife's full names,	Names and Su	rname:				•		
surname and ID number:	ID Nr:							

## Applicant 2

(If married in community of prop	erty, p	plea	se c	:om	plete	this	sec	tion	with	spo	lse	deta	ails):
Full name:													
Surname:													
Referred to as:													
ID Number:													
Residential address: currently													
Residential address: <i>during</i>													
sequestration													
Postal address: (if different)													
Tel at home:													
Mobile number:													
Tel at work:													
E-mail address (Private, we can use it													
Profession: <i>currently</i>	ļ												
Profession: during sequestration													
Current Employer:													



		3
Name and telephone number of		
a family member or friend in		
case of emergency:		
PI	ERSONAL INFORMATION:	
Nett salary (after deductions) of		
husband:		
Nett salary (after deductions) of		
wife:		
How many minor children?		
Do you receive maintenance? If		
yes, how much?		

<b>EXPENSES:</b> (we must prove to the Court that you are ready for rehabilitation)				
House rental				
Water and electricity				
Telephone				
Mobile				
Domestic worker				
School fees				
Groceries				
Policies				
Insurance				
Vehicle (borrowed)				
Fuel				
Medical aid				
Maintenance				
NETT AMOUT:				

We must prove that you have a net amount of between R 3000 and R 3500 available monthly. If, on the other hand, your net amount available is too excessive, the Judge will also ask questions