REPUBLIC OF ZAMBIA IN THE [SUBORDINATE COURT / HIGH COURT] FOR ZAMBIA [DISTRICT/PROVINCE] REGISTRY

DEBTOR DETAILS DISCLOSURE FORM

(To Be Completed by Debtor Pursuant to Legal Debt Recovery Proceedings) Pursuant to the Judicature Administration Act, Cap. 24, and Related Statutory Provisions

SECTION A: DEBTOR INFORMATION

Full Name:	
National Registration Card No.:	
Date of Birth:	
Residential Address:	
Contact Number(s):	
Email Address (if applicable):	
Occupation / Business:	
Employer or Business Name:	
Employer Contact & Address:	

SECTION B: IDENTIFIED ASSETS AND INCOME SOURCES

Movable Property

(Indicate items owned by ticking below and provide description)

□ Vehicle(s) – Make, Model, Reg. No.:

Household Furniture and Electronics: ______

Farm Equipment / Tools: ______

Other (specify): ______

Immovable Property (Land / Buildings):

Title Deed No. / Plot No.:

Location (District/Province):

Nature of Ownership:
□ Leasehold
□ Customary
□ Freehold

Estimated Market Value (ZMW):

Bank Accounts (attach bank statement if required)

Bank Name: _____

Account Type: _____

Account Number (last 4 digits only):

Regular Monthly Income

Source (e.g., employment, rental):

Estimated Monthly Amount (ZMW):

Other Debts or Liabilities

Creditor Name: _____

Amount Owed (ZMW):

SECTION C: LEGAL BASIS FOR DISCLOSURE

This form is completed pursuant to a lawful demand made under the authority of the **Judgments Act, Cap. 81**, the **Courts Act, Cap. 27**, and rules of court governing debt enforcement proceedings.

Failure to make full and honest disclosure may amount to contempt of court and/or constitute an offence under the **Penal Code**, **Cap. 87** for providing false information.

SECTION D: CONFIDENTIALITY NOTICE

All information provided shall remain confidential and used solely in connection with debt recovery proceedings, in accordance with the **Data Protection Act No. 3 of 2021** and other relevant laws.

SECTION E: DECLARATION BY DEBTOR

I, the undersigned, do solemnly and sincerely declare that the information provided herein is true, complete, and correct to the best of my knowledge and belief. I understand the legal consequences of submitting false or misleading information.

Name of Debtor (Print):

Signature:	
Signature.	

Date: ____ / ____ / ____

SECTION F: COMMISSIONER FOR OATHS (IF APPLICABLE)

Sworn before me at _____

this _____ day of _____ 20____

Signature of Commissioner for Oaths:

Name:

Designation / Rank: _____

(Official Stamp or Seal)

SECTION G: FOR OFFICE / LEGAL USE ONLY

Case Reference Number:

Court File Number (if any): _____

Receiving Officer or Clerk: _____

Date Received: ____ / ____ / ____