Fill in this information to identify your case					
UNITED STATES BANKRUPTCY COURT DISTRICT OF COLORADO					
Debtor 1:				Case #:	
	First Name	Middle Name	Last Name		
Debtor 2:				Chapter:	13
	First Name	Middle Name	Last Name		

Local Bankruptcy Form 3015-1.3 Verification of Confirmable Plan

Complete bracketed sections.

The debtor moves the Court for an order (i) confirming the Chapter 13 Plan filed on **[month/day/year**], (docket no. _____ **[#]**), and, if applicable, (ii) valuing the collateral of secured creditors to be paid through the Plan pursuant to 11 U.S.C. § 506. In support thereof, the debtor verifies the following:

The Debtor(s) hereby verifies the following:

- a. the docket no. for the applicable plan now pending confirmation is docket no. _____ [#] and the certificate of service filed related to the Plan is docket no. _____ [#];
- b. the debtor is substantially (within 30 days) current having made all payments due under the terms of the Plan as of the date the debtor files the Verification.
- c. there were no objections filed, or any objections to plan confirmation have been withdrawn by the objector in writing or otherwise overruled by the Court, and the Plan may be confirmed without further notice or hearing;
- d. the debtor has paid all amounts required to be paid under domestic support obligations that became payable after the date of the filing of the petition or the debtor has no domestic support obligations;
- e. the debtor has filed all tax returns required under 11 U.S.C. § 1308;
- f. all statements in the plan to be confirmed are true and correct and the plan contains sufficient facts to allow confirmation; and
- g. The debtor (or the Court, as applicable) has provided appropriate notice of the plan and any amendments, serving them as required under 11 U.S.C. § 342(e) and (f), Fed. R. Bankr. P. 2002(b), 9014 and 7004, and L.B.R. 3015-1, or as otherwise ordered by the Court.

WHEREFORE, the debtor requests that the Court enter an order confirming the plan.

Part 2 Signature of Debtor's Attorney or Debtor (if unrepresented)

Dated:

By: _____ Signature

Bar Number (if applicable): _____ Mailing Address: _____ Telephone number: _____ Facsimile number: _____ E-mail address: _____