Will Questionnaire

Neves SOLICITORS

As part of our wills service we meet with you (our clients) to advise you on your individual circumstances. The following questionnaire helps us put a more detailed picture of you and your circumstances together, so any information you can complete prior to our meeting can save us time when we do get together. If you are coming to us as a couple it is helpful if you can complete a form each.

Personal Information

Your full name (including middle names)	
Any previous surnames:	
Your address:	
Contact tel no(s):	
Email address:	
Your date of birth: (DD/MM/YYYY)	

Do you need your will prepared urgently for medical reasons?	Yes ☐	No ☐

Questions about you

1. Have you made a Will before?	Yes ☐	No ☐
1a. Where is that Will held?		

2. Your status, are you: (Please tick all that apply)	Married ☐	Divorced ☐
	Engaged ☐	Civil Partnership ☐
	Living with your partner ☐	Widowed ☐
	Single ☐	Separated ☐
	Spouse name:	

If there is insufficient space for all your information please use the Additional Notes pages at the end of this document

3. Do you have children and/or stepchildren?	Yes ☐	No ☐
	If you have children under the age of 18, we will discuss guardianship arrangements with you.	
Details of children/stepchilden:	Full name of child (1):	
	Date of Birth (1):	
	Address (1):	
	Full name of child (2):	
	Date of Birth (2):	
	Address (2):	
	Full name of child (3):	
	Date of Birth (3):	
	Address (3):	
	Full name of child (4):	
	Date of Birth (4):	
	Address (4):	
	Full name of child (5):	
	Date of Birth (5):	
	Address (5):	
	Full name of child (6):	
	Date of Birth (6):	
	Address (6):	
	Full name of child (7):	
	Date of Birth (7):	
	Address (7):	

4. Do you have grandchildren?	Yes ☐	No ☐
4a. If any of your children have stepchildren or adopted children that you wish to include please provide details:	Full name (1):	
	Date of Birth (1):	
	Address (1):	
	Full name (2):	
	Date of Birth (2):	
	Address (2):	
	Full name (3):	
	Date of Birth (3):	
	Address (3):	
	Full name (4):	
	Date of Birth (4):	
	Address (4):	
	Full name (5):	
	Date of Birth (5):	
	Address (5):	
	Full name (6):	
	Date of Birth (6):	
	Address (6):	
	Full name (7):	
	Date of Birth (7):	
	Address (7):	

5. Other than your children, is there anyone financially dependent on you in any way?	Yes ☐	No ☐
5a. If yes, please provide their details:	Full name (1):	
	Date of Birth (1):	
	Address (1):	
	Full name (2):	
	Date of Birth (2):	
	Address (2):	
	Full name (3):	
	Date of Birth (3):	
	Address (3):	
	Full name (4):	
	Date of Birth (4):	
	Address (4):	
	Full name (5):	
	Date of Birth (5):	
	Address (5):	
	Full name (6):	
	Date of Birth (6):	
	Address (6):	
	Full name (7):	
	Date of Birth (7):	
	Address (7):	

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Questions about your estate

Please note that there is no need for you to obtain valuations of any of your assets and liabilities. We just need approximate figures. Should any exact figures be required we will go through this with you at our meeting.

6. Do you own a property or properties in the UK?	Yes ☐	No ☐	
Please give the addresses of all the properties you own unless it is your main residence (previous page):	Additional address (1):		
	Approximate value of the property	£	
	Is this property owned jointly?	Yes ☐	No ☐
	If so, please state who the other person is/people are & their share:		
	Additional address (2):		
	Approximate value of the property	£	
	Is this property owned jointly?	Yes ☐	No ☐
	If so, please state who the other person is/people are & their share:		
	Additional address (3):		
	Approximate value of the property	£	
	Is this property owned jointly?	Yes ☐	No ☐
	If so, please state who the other person is/people are & their share:		

7. Do you own the property listed as your address on page 1?	Yes ☐	No ☐	
If yes, what is the approximate value of the property?	£		
Is this property owned jointly?	Yes ☐	No ☐	
If yes, please state who the other person is / people are and their share.	Name (1):		Share %:
	Name (2):		Share %:

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8. Are there outstanding mortgages on any of your properties?	Yes ☐	No ☐
If yes, please state the address and approximate outstanding	Address (1):	
	Approximate amount outstanding:	£
	Address (2):	
	Approximate amount outstanding:	£

9. Do you own property outside the UK?	Yes ☐	No ☐
If yes, please give the approximate value:	£	
Is it owned jointly?	Yes ☐	No ☐
If so, please state who the other person is/people are & their share:		

10. Please state the approximate value of your other assets (i.e. bank accounts, stocks and shares etc.)				
	Bank or Society	Sole	Joint	Your share
Sums held in banks or building societies (include ISA accounts)		☐	☐	£
		☐	☐	£
		☐	☐	£
		☐	☐	£
	Stock. shares, trust name	Sole	Joint	Your share
Stocks, shares, unit trusts etc.		☐	☐	£
		☐	☐	£
		☐	☐	£
		☐	☐	£
Bonds		☐	☐	£
		☐	☐	£
National Savings		☐	☐	£
		☐	☐	£
Other		☐	☐	£
		☐	☐	£

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11. Do you have a pension plan(s)?	Yes ☐	No ☐
What is the approximate value of the Pension Plan(s)?	£	

12. Do you have life insurance?	Yes ☐	No ☐
	Amount of cover: £	
	Is it Death in service? ☐	Is it a separate policy? ☐

13. Do you expect to be a beneficiary in a Will or Trust?	Yes ☐	No ☐
13a. Do you currently benefit from a trust fund?	Yes ☐	No ☐
If so, please provide brief details		

14. Have you made a gift of cash or assets over £3,000 per tax year in the last 7 years? (No need for gifts under £3000). Please note: If you have made gifts into trust we may have to consider earlier gifts.	Please give details of Recipient	Value
		£
		£
		£
		£
Have you made any cash gifts since 1986 where you still benefit from the asset given away (as there may be tax implications):	Yes ☐	No ☐

15. Businesses		
Do you own a business?	Yes ☐	No ☐
If yes, do you own it solely or with another person?	Yes ☐	No ☐
If you own with another person, do you have a shareholder agreement in place?	Yes ☐	No ☐
Do you require a Business Power of Attorney to allow your attorney to take business decisions for you in your absence?	Yes ☐	No ☐
Please confirm the nature of the business		

Questions about your intentions in your Will

Most couples want to benefit each other when they die. If you die first, this can mean that sometimes your assets don't pass to your children (or any other chosen beneficiaries). E.g. If the surviving partner remarries, has a live-in partner or goes into care. We can discuss your options to allow your partner to benefit during the rest of their life, but ultimately benefit your children or chosen beneficiaries. We will talk to you about your options at our meeting but it is helpful if you could let us know what your current intentions are.

1. Who would you like to be your Executors, i.e. the persons with the authority to carry out your instructions after you die?	Full name: Address: Full name: Address:

2. Who would you like to be the Guardians for your children? (Only applicable where you have children under the age of 18)	Full name: Address: Full name: Address:

3. Do you want to leave any cash legacies to anyone?	Yes ☐	No ☐
If yes, to whom:		

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4. Do you want to leave any specific items to anyone?	Yes ☐	No ☐
If yes, please give details:		

5. Are any of your beneficiaries vulnerable or do they give you cause for concern?	Name:
	Reasons for concern:

6. If you are married or in a civil partnership, do you want your spouse/civil partner to inherit your entire estate on your death?	Yes ☐	No ☐
7. If your spouse/civil partner dies before you, do you want your children to inherit your entire estate equally between them?	Yes ☐	No ☐
If yes, if any of your children die before you leaving children of their own, i.e. your grandchildren, would you want their children to inherit their share equally between them?	Yes ☐	No ☐

8. At what age would you like your beneficiaries to inherit?	18 ☐	21 ☐	25 ☐	Other ☐

9. If a disaster scenario occurred and you had no beneficiaries remaining i.e. all had died together, who would you like to inherit?	

10. Would you like to be buried or cremated?	Buried ☐	Cremated ☐
Do you have any special wishes for your remains?		
Do you have a funeral plan?	Yes ☐	No ☐
If yes, please give details:	Funeral company:	
	Reference:	
	You may wish to prepare a separate note with full details of your wishes for your funeral for passing to your family and executors.	

11. Are you interested in making a lasting power of attorney? If you have an existing power of attorney we would be happy to review this.	Yes ☐	No ☐

Additional notes

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Additional notes

Expert. Trustworthy. Approachable.

Harpenden | Luton | Milton Keynes

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