

Wills Questionnaire Form

Section A

About you (This Section must be completed in all cases)

Surname

Forenames

Title

Address

Post Code

Telephone (Day)

Telephone (Evening)

Telephone (Mobile)

Email

Date of Birth

Occupation

Martial Status

Married

Single

Widowed

Divorced

Other (please state)

Do you already have a Will?

If so, where is it held?

Wills Questionnaire Form

Section B

About your partner (This Section must be completed if you are living with someone in a permanent relationship)

Your Partner's Surname

Your Partner's Forenames

Your Partner's Title

Your Partner's Date of Birth

Your Partner's Occupation

Your Partner's Martial Status

Married

Single

Widowed

Divorced

Other (please state)

If not married, are you likely to marry in the foreseeable future?

Yes

No

Does your Partner already have a Will?

If so, where is it held?

Does your partner have children by a previous relationship? (If so please complete the information)

Yes

No

Continue on a separate piece of paper if necessary - do not include details of your children or any child that has been adopted by you.

Name

Occupation

Address

Date of birth

Wills Questionnaire Form

Name

Occupation

Address

Date of birth

Name

Occupation

Address

Date of birth

Name

Occupation

Address

Date of birth

Name

Occupation

Address

Date of birth

Which of these children (if any) do you or your partner financially support?

Wills Questionnaire Form

Section C

About your children (Please complete the following paragraphs for each child. Continue on a separate sheet of paper if necessary - Do include any child that has been adopted by you)

Name

Occupation

Address

Date of birth

Name

Occupation

Address

Date of birth

Name

Occupation

Address

Date of birth

Name

Occupation

Address

Date of birth

Wills Questionnaire Form

Which of these children (if any) do you or your partner financially support?

Section D

About your estate

Do you own your house/flat?

Yes

No

Is it owned jointly with another person?

Yes

No

What is its approximate value?

Is it mortgaged?

Yes

No

How will the mortgage be paid off in the event of your death?

Are you self employed or a private company shareholder? If the answer to (a) is yes please give details

Please give details of any property you own overseas

The following Sections relate to your Will (even in the case of a simple Will)

You should appoint executors (and guardians, if you have children under 18 years old). It is advisable to name at least 2 executors.

You may wish to give cash sums or specific items to certain named beneficiaries.

You should then say who is to inherit the remainder of your estate (that person is called your 'principal residuary beneficiary').

You should then say who is to inherit the remainder of your estate if your principal residuary dies before you.

Wills Questionnaire Form

Section E

Only complete if you have a husband/wife/partner

If your husband/wife/partner survives you do you wish to leave all your estate to him/her?

Yes

No

If no, please specify what you do wish to leave you husband / wife / partner.

If your husband/wife/partner survives you do you wish to leave all your estate to him/her?

Yes

No

If your husband/wife/partner survives you, please tick which of the following alternatives is correct:

I wish my husband/wife/partner to act as my only executor.

I wish my husband/wife/partner to act as an executor jointly with another.

I do not wish my husband/wife/partner to act as my executor

Section F

Your executors (to be completed in all cases)

N.B. Even if you have ticked appropriately, you will still have to name executors in case your husband / wife / partner dies before you or is unable, for whatever reason, to act as an executor.

Do you wish solicitors to act as your executors?

Yes

No

Do you wish solicitors to act as your executors jointly with a friend or relation?

Yes

No

Yes

No

Wills Questionnaire Form

If no, please give full names and addresses of two executors (or one if solicitors are to be first executors).

First Executor's Name

Occupation

Address

Relationship to you

Second Executor's Name

Occupation

Address

Relationship to you

Section G

To be completed if you have children.

Guardian

If you have children under the age of 18, you should consider carefully appointing a guardian to look after them in case you die leaving them with no surviving parent to look after them. If you wish to appoint a guardian please complete the following details about the person you wish to appoint after you have discussed the matter with these persons (please note that being the guardian of another persons child carries with it a lot of responsibility). It is often sensible to appoint as the second guardian the husband or wife of the first guardian.

First Guardian's Name

Occupation

Address

Relationship to you

Wills Questionnaire Form

Second Guardian's Name

Occupation

Address

Relationship to you

Are your children your stepchildren?

Yes

No

Are they the children of both you and your partner?

Yes

No

In what shares are the children to inherit your estate?

Name

Age

Share (%)

Name

Age

Share (%)

Name

Age

Share (%)

Name

Age

Name

Age

Name

Age

Name

Age

Share (%)

Wills Questionnaire Form

Section H

Complete in every case

Specify gifts you may wish to include in your Will. Gifts may include gifts of cash or personal or household items to certain named persons or charities. If so please give details. (Continue on separate sheet as necessary).

Person who is to receive gift details of gift *(see note below)

Name

Gift(s)

Address

Name

Gift(s)

Address

Name

Gift(s)

Address

Name

Gift(s)

Address

Name

Gift(s)

Address

* Please indicate with a tick which, if any, of the items mentioned above are to be given to the person named even if your husband / wife / partner survives you.

Wills Questionnaire Form

After all your debts, liabilities, taxes etc have been paid and the gifts mentioned in above have been handed to the person mentioned, what is left over is called 'your residuary estate'. In Section E you may have indicated that you want your husband / wife / partner to receive everything, but in case he / she may die before you or in case you have no husband / wife / partner it will be necessary in all cases to say who (or which charity) is to receive your residuary estate. If more than one person or charity is to share in your residuary estate, please indicate below by stating the percentage share each person or charity is to receive.

Name _____

Address _____

Relationship to you _____

Share (%) _____

Age to benefit ** _____

Name _____

Address _____

Relationship to you _____

Share (%) _____

Age to benefit ** _____

Name _____

Address _____

Relationship to you _____

Share (%) _____

Age to benefit ** _____

Name _____

Address _____

Relationship to you _____

Share (%) _____

Age to benefit ** _____

** If the persons named are not to receive their share of your estate until they have reached a certain age, please say at what age they are to benefit.

