

# CLIENT INFORMATION FOR WILLS



## PERSONAL INFORMATION

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FULL NAME: .....

ANY NAME YOU ARE ALSO KNOWN BY (aka): .....

ADDRESS: .....

OCCUPATION: .....

DATE OF BIRTH: .....

PHONE NUMBERS: .....

EMAIL ADDRESS: .....

### EXISTING WILL

Do you have an existing Will? **YES / NO**  
If **yes** please advise where this is held so that we can uplift for you: .....

### TIME CONSTRAINTS

Are there any current issues i.e.: travel or ill health we should be aware of that requires your Will(s) to be completed urgently? **YES / NO** Please specify: .....

Required by when .....

### MARITAL STATUS (please tick which one)

Married  De-facto  Single  .....  
**FULL** name of your husband/wife/partner?

Do you have any children? If so please detail **FULL** names and ages.

(1) Name: .....	(3) Name: .....
Age: .....	Age: .....
(2) Name: .....	(4) Name: .....
Age: .....	Age: .....

Are these children with your Husband/Wife/Partner? **YES / NO**  
If De Facto relationship, please advise how long you have been in a relationship

.....

Please advise if you have a Contracting Out Agreement (also known as Section 21 Agreement or Pre-nup)

.....

If yes, we will require a copy.

**Please make sure you have put the full names with correct spelling, including any middle names.**

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## EXECUTORS AND TRUSTEES

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### FILL OUT IF YOU ARE A COUPLE:

Would you like your Husband/Wife/Partner to be your Executor and Trustee **YES / NO**

Who would you like as an alternate (someone to act if the first Trustee/Executor cannot) we recommend either 1 or 2 people:

(1) Full Name: .....	(2) Full Name: .....
Address: .....	Address: .....
.....	.....
.....	.....
Phone: .....	Phone: .....
Occupation: .....	Occupation: .....
Relationship to You: .....	Relationship to You: .....

### FILL OUT IF YOU ARE SINGLE:

If you are **single** who would be your Trustee and Executor – we recommend 2 people.

(1) Full Name: .....	(2) Full Name: .....
Address: .....	Address: .....
.....	.....
.....	.....
Phone: .....	Phone: .....
Occupation: .....	Occupation: .....
Relationship to You: .....	Relationship to You: .....

## GIFTS / LEGACIES

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Do you wish to make any specific gifts (items) or legacies (gifts of money)? **YES / NO**. If **yes** go to 5.2.

Please give a full list of names, addresses and occupations of the recipients of the gift or legacy and full details of what you wish to leave them (*continue on another sheet if there are additional gifts*):

(i) GIFT (specify): .....	Full Name: .....
Legacy: \$..... (amount)	Address: .....
	.....
	Relationship to You: .....
	Age: .....
(ii) GIFT (specify): .....	Full Name: .....
Legacy: \$..... (amount)	Address: .....
	.....
	Relationship to You: .....
	Age: .....

**Please make sure you have put the full names with correct spelling, including any middle names.**

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(iii) GIFT (specify): ..... Full Name: .....  
 Legacy: \$..... (amount) Address: .....  
 .....  
 Relationship to You: .....  
 Age: .....

**Digital legacy** – You can give your Trustees instructions on how you wish your online presence to be dealt with in respect of computer passwords or social media. You would need to ensure you can provide sufficient information for your Trustees access a storage place of passwords etc.

Do you wish to make provision for your digital footprint? **YES / NO**

Do you wish this to include removing your social media profile(s). **YES / NO**

**BITCOIN / CRYPTOCURRENCY**

Do you own Bitcoin or a Cryptocurrency? **YES / NO**

**IF YES** please ensure that your Executors know where to access your passwords, as Bitcoin and Cryptocurrency accounts become inaccessible in the event of death.

.....  
 Pets – do you have any pets you would like someone to look after for you when you pass away? **YES/NO**

**IF YES** – Do you want to leave this person money to do that? **YES/NO**

Please provide their details:

Full Name:.....  
 Address: .....  
 Phone: .....  
 Occupation: .....  
 Relationship to You: .....  
 Amount to receive:.....

**BENEFICIARY INFORMATION**

**Couples:** Do you wish your estate firstly to go to your husband/wife/partner and then to the beneficiaries listed below if your husband/wife/partner is no longer alive? **YES/NO**

**All:** Please provide details of your **Beneficiaries** (eg: children)

(1) Full Name:.....	(2) Full Name: .....
Address: .....	Address: .....
.....	.....
.....	.....
Phone: .....	Phone: .....
Occupation: .....	Occupation: .....
Relationship to You: .....	Relationship to You: .....
Share to receive ie: ¼, ½ or percentage:.....	Share to receive ie: ¼, ½ or percentage: .....

**Please make sure you have put the full names with correct spelling, including any middle names.**

(3) Full Name:.....	(4) Full Name: .....
Address: .....	Address: .....
.....	.....
.....	.....
Phone: .....	Phone: .....
Occupation: .....	Occupation: .....
Relationship to You: .....	Relationship to You: .....
Share to receive ie: ¼, ½ or percentage:.....	Share to receive ie: ¼, ½ or percentage: .....

**Alternatively** do you wish to provide your estate to a charity or organisation – If yes please provide details.

**Second / Substitute Beneficiaries**

If any beneficiary dies before you, what would you like to happen to their share? (For instance do you want it to go to the deceased beneficiary’s children.)

.....  
 .....

**OMISSIONS (i.e. people you are NOT providing for)**

If you are omitting any of your family from your Will, please indicate the reasons, as family omitted may apply to the Court for provision from the estate:

.....  
 .....

**ASSETS/LIABILITIES**

**YOUR PROPERTY (HOUSE(S))**

Is your property owned: **Solely** or **Joint Tenants** or **Tenants in Common** or **in a Trust?** (*please circle which one*) **PLEASE NOTE** We will take a title search of the property to check.

If owned in a Trust what is the Trust name and who are the Trustees?

Name of Trust: .....

Trustees: .....

.....

**SHARES/SHAREHOLDING**

Do you own any shares? **YES / NO** (if **yes** please answer 8.2)

Name of company(s) you own shares with .....

.....

**Please make sure you have put the full names with correct spelling, including any middle names.**

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**OTHER INVESTMENTS**

Do you have any other Investments not owned jointly with your partner? If so, please list:

- (i) ..... (iv) .....
- (ii) ..... (v) .....
- (iii) ..... (vi) .....

**LOANS (do you owe anyone or does someone owe you?)**

Do you owe anyone money or has money been loaned to you with the expectation it will be repaid on your death? **YES / NO**

**If YES, please advise full details:**

.....

.....

.....

.....

Are you owed money by anyone? **YES / NO**

**If YES, please advise full details:**

.....

.....

.....

**OTHER INFORMATION**

Have you made any promise, whether enforceable or not, to leave property by Will? If so please give details.

.....

.....

Do you have any power of appointment under any trust or estate or power to appoint directors, which can be exercised under your Will?

.....

.....

**SPECIAL PROVISIONS**

Are there any other special provisions you wish to make, for example, a life interest which allows a person to benefit from your estate for their life? **YES / NO**

.....

.....

.....

***Please make sure you have put the full names with correct spelling, including any middle names.***

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**APPOINTMENT OF TESTAMENTARY GUARDIAN(S)**

Do you wish to appointment testamentary guardian(s) for your children under the age of 18 years?

Name: ..... Name: .....

Address: ..... Address: .....

.....

.....

Occupation: ..... Occupation: .....

Relationship to You: ..... Relationship to You: .....

**FUNERAL DIRECTIONS**

Do you wish to be buried or cremated? .....

Do you have any special funeral directions?

.....

.....

.....

Are you a Donor? If so, do you have provision on your Drivers Licence? .....

**ENDURING POWERS OF ATTORNEY**

Do you have Enduring Powers of Attorney? **YES / NO**

If **yes**, do you have Personal Care and Welfare? **YES / NO**

and Property? **YES / NO**

If you do not have Enduring Powers of Attorney would you like us to prepare these. **YES / NO**

If **yes** please complete our Enduring Powers of Attorney forms.

**IMPORTANT**

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1. *It is **really important** to know how your property is held i.e.: either Joint Tenancy or Tenants in Common as Joint Tenancy is unable to be bequeathed and goes to the surviving owner on death.*
  2. *If you are in a reconstituted relationship ie: 2<sup>nd</sup> marriage with children of a previous relationship it is really important you discuss this with us to ensure your assets are structured correctly and that is reflected in your Will.*
  3. *If you intend to omit a family member ie: a child from your Will please discuss this further with us.*

**Please make sure you have put the full names with correct spelling, including any middle names.**

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