WILL QUESTIONNAIRE

PERSONAL DETAILS		
What is your full legal name:		
Male / Female:		
Are you known by any other name(s):		
, ,		
Do you own assets in both the above names:		
Occupation:		
Date of Birth:		
Place of Birth:		
Nationality and Citizenship:		''
IRD Number:		
DOCTOR TO CONFIRM YOU HAVE (INCREASING NUMBERS OF CLAIMS ACCUSATION MADE IS THAT THE W	E. IF SO, WE WILL NEED TO OBTAIN A LETTER CAPACITY TO SIGN A NEW WILL. THIS IS BECAUS S MADE WHEN PEOPLE PASS AWAY AND USUAL VILL-MAKER WAS NOT OF SOUND MIND. THEREFO TER FOR ALL CLIENTS OVER 70 YEARS OF AGE.	SE THERE ARE LLY THE FIRST
If this applies to you, please give us yo	ur doctor's details so that we can write to them.	
Name of Doctor:		
Name of Medical Practice:		
Address:		
Phone Number:		·
RELATIONSHIP DETAILS (IF A Full legal name of current spouse / partner: Is your spouse / partner known by any other name:	APPLICABLE):	
Type of relationship – marriage /		
defacto relationship/ civil union:		
Date of commencement of relationship:		
Date of Marriage:		
Date of civil union:		
Full legal names and ages of any children of your relationship (if any):		
Have you legally adopted any of your spouse / partner's children:		
Full legal name(s) and age(s) of adopted stepchildren:		
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Will Questionnaire 2 Names and ages of other children or financially dependent children: (Include the name(s) of any child under the age of -16 years who live in your home and is not referred to above: Is there an existing pre-nuptial agreement, matrimonial property agreement or property Yes: No 🗌 sharing agreement relating to your current relationship? If not held by DG Law, where is it: PRIOR RELATIONSHIP(S) (IF APPROPRIATE): Full legal name of former spouse / partner: Are they known by any other name: Type of relationship: marriage / defacto relationship / civil union: Date of commencement of relationship / marriage: Date of separation: Date of dissolution of marriage / civil union: Names and ages of children by this relationship: Did you legally adopt any of your former spouse / partner's children?: Full legal name(s) and age(s) of any adopted stepchildren (if any): Is there any existing separation agreement / matrimonial property agreement / section 21 agreement and/or defacto property agreement which resolves the property issues with № П respect to the prior relationship: If not held by DG Law, where is it: **ASSETS AND LIABILITIES:** Please note, we do not ask these questions to be nosy. The answers help us to draft your Will in the most effective manner. The answers may also highlight areas where we may be able to help you structure your ownership of assets better or areas that could cause problems for you in the future. Also, if there is ever a Court case disputing the validity of your Will or because someone is making a claim against your estate, the answers to these questions are the sort of evidence Judges require law firms to produce. The original of this questionnaire is held in our deeds safe with your original Will. If you have any concerns about answering any of these questions, please discuss with your legal adviser. Please list the major assets held in your sole name and their approximate value:

Please list the major liabilities in your sole name and the approximate value:

Will Questionnaire 3 Please list the major assets held in your partner/spouses sole name and their approximate value: Please list the major liabilities in your partner/spouses sole name and the approximate value: Please list the major assets held in the joint names of yourself and your partner/spouse and their approximate value: Please list the major liabilities in the joint names of yourself and your partner/spouse and the approximate value: Please list any other major assets/liabilities you have an interest in that are not recorded above, eg trust: Have you personally guaranteed any loan/s or hire purchase agreement for companies, children, trust/s? If so, please provide details: WILL INSTRUCTIONS: Do you want your spouse / partner to be the sole executor/ and sole beneficiary should they Yes: No No survive you? An executor is the person who signs all the legal paperwork and deals with all of your assets in accordance with your Will. A beneficiary is the person or persons who inherit your assets and money. If your spouse / partner dies before you, please advise whom you wish to be the Executor/s of your Will. (We suggest you have two rather than one Executor): Full legal name, address, occupation and occupation of Executor/s. Please also state their relationship to you: 2. 3. If you do not have a spouse or if you do not wish your spouse to be executor, please advise whom you wish to appoint as Executor/s of your Will. (We suggest you have two rather than one Executor): Full legal name, address, occupation and occupation of Executor/s. Please also state their relationship to you: 2.

Will Questionnaire 4

Do you want to appoint guardians for an address/es and occupation/s:	y children under 20 years of age? If so, please pro	ovide their fu	ll name/s,				
Full legal name, address, occupation and occupation of guardian/s.	1.						
	2.	-(
(excluding money) to various people, then	of money, jewellery etc? Please note, if you wish to le we suggest you prepare a separate list that can be he e your mind, you can simply send us an updated list re	ld with your	Will. That				
Separate list attached?		Yes:	No 🗌				
Do you want to forgive any debts owed to y	rou, eg loans to family trust or children?	Yes:	No 🗌				
Do you want to create a life interest for someone upon your death? If so, then you will need to discuss this with your legal adviser.							
addresses, occupations and relationship to 1.	ssets to eg, spouse, children, trust, grandchildren? Ple you:						
2.							
3.							
4.							
5.							
6.							
If one of the people named above dies before to their children in their place?	fore you, do you want their share to be passed on	Yes:	No 🗌				
If not, do you want that person's share a above?	added to the shares of the other people named	Yes:	No 🗌				
If neither of the options above suit, please a	advise what you want to happen instead:						
	al capacity, eg are any of them handicapped or mental health or ability to look after themselves or	Yes:	No 🗌				
If your answer is no, please give us some of	details:						
If your children are beneficiaries, at what aginheritance?	ge do you want them to receive their —	Y	ears Old				
CREMATION OR BURIAL:							
Do you have any preference for cremation	or burial?	Crematio	n / Burial				
Do you have any specific instructions re yo	ur cremation or burial, eg pre-purchased plot? If so, pl	ease give us	details:				

Will Questionnaire 5 **HEALTH:** Do you have any serious health issues at present? POWERS OF ATTORNEY: Yes: ☐ No ☐ Do you have current Powers of Attorney and/or Enduring Powers of Attorney? Yes: No \square If so, are they held by DG Law? If not, who are they held by? If you do not have Powers of Attorney, then we recommend you discuss them with your legal adviser. PROPERTY (RELATIONSHIPS) ACT: Do you think that any of the arrangements you have made in your Will, will cause problems with a current or former spouse when you die? If you have any concerns, please discuss with your legal adviser. **FAMILY PROTECTION ACT:** Have you excluded a member of your family from your Will, who would be entitled to make a Yes: No 🗌 claim against your estate on your death? The people entitled to make a claim are spouse, civil union partner, defacto partner, children, grandchildren, stepchildren in certain circumstances, your parents in certain circumstances.

If you have any concerns, please discuss with your legal adviser.

LAW REFORM (TESTAMENTARY PROMISES) ACT:

Have you made any promises to anyone to reward them in your Will for work carried out or services rendered to you during your lifetime?

Yes: No No

If you have any concerns, please discuss with your legal adviser.

PLEASE SET OUT ANY OTHER RELEVANT INFORMATION YOU THINK WE MIGHT NEED TO KNOW:						
Name:						
Signature:						
oignature.						
Date:						
			_			