

YOU AND YOUR FAMILY

I. YOUR DETAILS

Forenames:	_____
Surname:	_____
Address:	_____ _____ _____
Postcode:	_____
Telephone No:	_____
Date of Birth:	_____
Occupation:	_____ (if retired, before retirement)
NI Number:	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>

Are you (or any member of your family) known by any other names and do you own any assets in a different name? If so, please give full details below:

BIRTH NAME	ALIAS
_____	_____
_____	_____
_____	_____

2. YOUR HUSBAND/WIFE/PARTNER

Forenames:	_____
Surname:	_____
Date of Birth:	_____
Occupation:	_____

3. MARRIAGE/PARTNERSHIP DETAILS

(a) Year of Marriage	<input type="text"/>
(b) Please tick this box if you are not married to your partner	<input type="checkbox"/>
(c) Please tick this box if you are intending to marry / re-marry in the near future	<input type="checkbox"/>
(d) Has either of you been married before?	<input type="checkbox"/> YES <input type="checkbox"/> NO

4. YOUR CHILDREN (including your children from a previous marriage or relationship)
- full names, dates of birth, and address if different from yours

Full Name:	_____
Date of Birth:	_____
Address:	_____ _____ _____
Full Name:	_____
Date of Birth:	_____
Address:	_____ _____ _____
Full Name:	_____
Date of Birth:	_____
Address:	_____ _____ _____

5. CHILDREN OF YOUR HUSBAND/WIFE/PARTNER'S PREVIOUS MARRIAGES OR RELATIONSHIPS - full names, dates of birth, and address if different from yours

Full Name:	_____
Date of Birth:	_____
Address:	_____ _____ _____
Full Name:	_____
Date of Birth:	_____
Address:	_____ _____ _____
Full Name:	_____
Date of Birth:	_____
Address:	_____ _____ _____

Please note:

- ◆ Illegitimate and adopted children (but not stepchildren) generally have the same rights of inheritance as other children.
- ◆ Children excluded from benefit under your Will may have a right to claim a share of your property in certain circumstances. Please ask for advice, if appropriate.

YOUR HOME & OTHER ASSETS

- 6. YOUR HOME** - is your home:
- | | YES | NO |
|---|--------------------------|--------------------------|
| | (Please ✓ box) | |
| (a) Owned | | |
| (i) in your name alone? | <input type="checkbox"/> | <input type="checkbox"/> |
| (ii) in joint names with your husband/wife/partner? | <input type="checkbox"/> | <input type="checkbox"/> |
| (iii) in the name of your husband/wife/partner alone? | <input type="checkbox"/> | <input type="checkbox"/> |
| (b) Rented? | <input type="checkbox"/> | <input type="checkbox"/> |
| (c) Other—eg. Provided by a relative? | <input type="checkbox"/> | <input type="checkbox"/> |

7. If your answer to Question 6 was (c), please give more details

<hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/>

8. Do you have a Business? YES NO
(Please ✓ box)

If yes, state type of business:

<hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/>

Is the Business:
(Please ✓ box)

A Company? **A Partnership?** **In your sole name?**

9. YOUR MAIN ASSETS

Please list your main assets below and give approximate values:

a)	
b)	
c)	
d)	
e)	
f)	
g)	
h)	

10. JOINT ASSETS

Do you have any jointly owned assets? If yes, please give a general description and their approximate values, and the name(s) of the other owner(s)

ASSET	VALUE	CO-OWNER

Please note: Jointly owned assets generally pass to the joint owner automatically and cannot be given away by Will

11. Do you own any Assets abroad?

If yes, please give details:

ASSET TYPE	VALUE	LOCATION

FUNERAL, EXECUTORS, GUARDIANS

12. FUNERAL

You may specify in your Will if you wish to be:
(Please ✓ box)

Buried

Cremated

No preference

Please note:

- ◆ You should make these wishes known to your immediate family as well and not rely on what is in your Will
- ◆ If you wish to leave any part of your body for medical purposes, tell your family and your doctor and carry a donor card

13. GUARDIANS

You may want to appoint one or two people to act as guardian(s) for children under 18. The appointment will usually only apply if you and the child's other parent are both dead. The position may be different if you are a single parent. Discuss this with the solicitor at your appointment. Guardianship involves a lot of responsibility and you should ask people to agree to act before appointing them.

(a) Full Name:	_____
Date of Birth:	_____
Relationship to you:	_____
Address:	_____ _____ _____
(b) Full Name:	_____
Date of Birth:	_____
Relationship to you:	_____
Address:	_____ _____ _____

14. EXECUTORS

You must appoint Executors to carry out the instructions in your Will. It is wise to have at least two, and you may appoint your husband / wife / partner as one. You should name other Executors to act if he/she is unable to do so. Partners of our firm will be pleased to act as your Executors—either alone or with a member of your family or friend.

List below up to four chosen Executors:

(a)	Full Name:	_____
	Date of Birth:	_____
	Relationship to you:	_____
	Address:	_____ _____ _____
(b)	Full Name:	_____
	Date of Birth:	_____
	Relationship to you:	_____
	Address:	_____ _____ _____
(c)	Full Name:	_____
	Date of Birth:	_____
	Relationship to you:	_____
	Address:	_____ _____ _____
(d)	Full Name:	_____
	Date of Birth:	_____
	Relationship to you:	_____
	Address:	_____ _____ _____

Would you like a Partner in the firm to act as your Executor?

(Please ✓ box)

YES

NO

BENEFICIARIES

The main part of your Estate is called “the residue”. (This is dealt with at Question 17). Before giving away the residue, you may wish to make certain gifts of cash or personal belongings to individual children, Grandchildren, friends or to charities. There will be known as “beneficiaries”.

15. CASH GIFTS

Please give the name and address of the beneficiary and the amount to be given, with the age of anyone who is under 18.

(a)	Full Name:	Amount:
	Date of Birth:	Age:
	Relationship to you:	
	Address:	
(b)	Full Name:	Amount:
	Date of Birth:	Age:
	Relationship to you:	
	Address:	
(c)	Full Name:	Amount:
	Date of Birth:	Age:
	Relationship to you:	
	Address:	
(d)	Full Name:	Amount:
	Date of Birth:	Age:
	Relationship to you:	
	Address:	

BENEFICIARIES (continued)

15. CASH GIFTS (continued)

Please give the name and address of the beneficiary and the amount to be given, with the age of anyone who is under 18.

(e)	Full Name:	Amount:
	Date of Birth:	Age:
	Relationship to you:	
	Address:	
(f)	Full Name:	Amount:
	Date of Birth:	Age:
	Relationship to you:	
	Address:	
(g)	Full Name:	Amount:
	Date of Birth:	Age:
	Relationship to you:	
	Address:	
(h)	Full Name:	Amount:
	Date of Birth:	Age:
	Relationship to you:	
	Address:	

16. GIFTS OF ARTICLES

Please give the names and addresses of people to whom you wish to leave specific items, and a full description of the article, to enable it to be identified. Please note that if you sell or replace one of these items, the beneficiary will get nothing—he or she will not be given the substituted item or the cash equivalent.

(a)	Full Name:	_____
	Date of Birth:	_____
	Relationship to you:	_____
	Address:	_____ _____
	Description of Article:	_____ _____
(b)	Full Name:	_____
	Date of Birth:	_____
	Relationship to you:	_____
	Address:	_____ _____
	Description of Article:	_____ _____
(c)	Full Name:	_____
	Date of Birth:	_____
	Relationship to you:	_____
	Address:	_____ _____
	Description of Article:	_____ _____
(d)	Full Name:	_____
	Date of Birth:	_____
	Relationship to you:	_____
	Address:	_____ _____
	Description of Article:	_____ _____

17. THE RESIDUE

This is all that you own, except jointly owned property and the gifts made in Questions 15 and 16. Please state below who is to receive the residue on your death and who is to receive it if they die before you. If there are gifts to your children, we may suggest a provision that if any of them dies before you, leaving children of his/her own, those children (your Grandchildren) will inherit their parent's share.

The following are the more common provisions made. If you wish to use one of these, tick the appropriate box—if not, please go to Question 18.

- (a) Everything to my husband / wife / partner named at Question 2 above outright, but if he/she has died, then to my children named at Question 4 above, equally;

- (b) Everything to my children named at Question 4 above, equally and any other children of mine;

You may choose the age at which your children will receive their entitlement. Insert choice from 18, 21 or 25 years in this box:

- (c) To my husband / wife / partner named at Question 2 above, but if he/she has died before me, to the person(s)/organisation(s) named in the box below. If not in equal shares, then show the share each is to take.

Relationship to you: _____

If none of the above choices is appropriate:

Please set out below who is to receive the residue and, if more than one person or organisation is involved, in what shares?

(a)	Name:	_____
	Date of Birth:	_____ Share: _____
	Relationship to you:	_____
	Address:	_____

(b)	Name:	_____
	Date of Birth:	_____ Share: _____
	Relationship to you:	_____
	Address:	_____

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