

## Probate and Estate Questionnaire

Please complete and return this questionnaire. This questionnaire provides us with the information we need in order to administer the estate, complete the Inheritance Tax Account and obtain the Grant of Probate.

### 1. ABOUT YOU

Your Full name		
Your Full address		
Your date of birth	Your telephone Number	Your email address
National Insurance Number		
Are you the sole Executor/Executrix?		
If not, please provide full details of all other Executor's/Executors		

**Please arrange to supply original or certified ID documents for each executor**

### 2. ABOUT THE DECEASED

Name of Deceased (please include any variations)		Date of Birth	
Address			
Occupation		Retired	YES/NO
Marital status: please give the name of spouse		Date and place of Marriage or civil partnership	
If a widow/widower, please provide full name and date of predeceased spouse.		Please provide copy of death certificate, copy of will and grant of probate if obtained for predeceased spouse.	
Date and place of death			
Date and place of birth			

Domiciled in England and Wales	YES/NO	National Insurance Number	
Please confirm if any surviving relatives, and their relationship to the deceased.			
If yes, please confirm details i.e. Full names, date of birth, postal address and contact details.			

**Please note that if we are instructed, we will require the original death certificate and the original will (if we do not already hold the original will).**

### 3. FUNERAL ACCOUNT

Funeral Director Name and Address	
Amount of Bill (please provide invoices if available)	
Has the funeral bill been paid? If so, please confirm full name of payor	
Please provide details of any wake expenses, floral tributes or headstone/memorial costs, and the receipts/evidence the costs.	

### 4. ONLY COMPLETE THIS PART IF THERE IS A WILL

Location of Will and any Codicils, or Letter of Wishes.			
Please confirm if the named beneficiaries in the will are alive and traceable	YES / NO	If not, please confirm the names of the deceased beneficiaries	
Please confirm if the addresses in the Will are still correct.	YES/ NO	If not, please provide updated address information	

If any beneficiary is under 18 years old, please provide full details of their parents.	
Are all specified gifts noted in the will still in the deceased ownership?	

**5. ONLY COMPLETE THIS PART IF THERE IS NO WILL OR NO EXECUTORS(S)**

Please note that this information will help establish who will be in charge of the deceased's property for the time being, and who will inherit it eventually.

If the deceased was married at death, please give spouse's full name, address and telephone number.	
If the deceased had children, please give their full names, addresses and telephone numbers. *If they are under 18 years old and still living at home, please provide only their date of births.	
If the deceased did not leave a spouse or children, what other relatives did they leave. Please provide full details and indicate each person's relationship.	

**6. THE DECEASED'S ASSETS**

Property			
Did the deceased own his / her home	YES / NO		
Was it solely owned or owned as joint tenants?			
Was it freehold or leasehold?	Freehold / Leasehold		
Please confirm where the title deeds are held?			
Is the property unoccupied	YES / NO	Have valuables been removed	YES / NO

Please estimate the value of the following property left by the deceased (please indicate if any property was owned jointly with another)	
House	
Furniture	
Clothing	

Jewellery	
Car, caravan, motorbike, boat (giving make, type and year if possible)	
Personal possessions	

Is there adequate insurance cover for the deceased's assets?	YES/ NO	Have the insurers been notified of the death?	YES / NO
Please list which valuables (if any) have been removed and to where			

Stocks and Shares			
Please list any holdings and the location of the share certificates			
Are the shares in the deceased's name			
Approximate value(s)			
If any, please give full name and addresses of stockbrokers acting			
Have you found any uncashed cheques or other indications money may be owed to the deceased.	YES / NO	If yes, please let us have these.	ATTACHED / TO FOLLOW

Building society accounts		
Please give address of society, account number and approximate value	Account/reference numbers	Value (£)
Bank accounts		
Please give address of bank, account numbers and approximate value	Account/reference numbers	Value (£)
Premium bonds		
Please list the bond numbers or bond holder number and approximate value	Account/reference number	Value (£)
National savings certificates		

Please list certificate or numbers and approximate value	Account/reference number		Value (£)	
National savings bank				
Please provide the book or account number and approximate value. *Did the deceased nominate the account in favour of anybody, and if so please provide full details.	Account/reference number		Value (£)	
Deceased's cash				
Please provide value of any monies found.				
Life Insurance				
		Account/reference number		Value (£)
Did the deceased have any life insurance. If so, please provide policy number and approximate value.				
Did the deceased pay any premium on any insurance policy apart from any referred to above within 14 years of death.				
Pensions				
Please list any pensions that the deceased was in receipt and where this was from. e.g. from employment, from spouse's scheme, state retirement pension. Please provide reference number and pension number.				
If applicable, has a widow's/widower's pension been applied for?				
If applicable, are there are other benefits paid (e.g. pension credit, attendance allowance)				
Please give details of any salary due to the deceased, or any fees not yet paid.				
Did the deceased have a business? Was the deceased a director of a company?				
Did the deceased own a far and/or agricultural land?	YES / NO	Did the deceased own any property which was rented out?	YES / NO	

Did the deceased have any property in a safety deposit box at the bank?	YES / NO	Was the deceased at the time of death entitled to a life interest, annuity or other interest in possession on settled property or trust?	YES / NO
Did the deceased own any property (such as holiday cottage) abroad?	YES / NO	If so, please provide details of what was owned and the location.	
Was the deceased in receipt of social security benefits? If so, please send us allowance book	YES / NO		
Was the deceased the joint owner of any property not mentioned above?	YES / NO		

## 7. DEBT AND LIABILITIES

**Please send us all bills that appear not to have been paid and are due for payment. (e.g. credit cards or store cards, electricity, gas, water, telephone, overdraft or loan account, council tax, rent, service charge)**

Do you know if the deceased guaranteed any loan	YES / NO	If the deceased has a business, do you know of any outstanding debts	YES / NO
If the deceased had an accountant or other adviser, please provide their full details and telephone number			
Did the deceased have any mortgage (including lifetime mortgage or equity release)	YES / NO	If yes, please provide lender details and account number	

## 8. GENERAL

**To establish the extent of any tax payments due, please provide details and dates of any gifts (including money, objects or land) or releases from settlements, made by the deceased within 14 years of his or her death.**

**Do you know of any familiar trusts or settlements from which the deceased benefited or was involved as a trustee?**

**Was anybody supported and maintained by the deceased at the time of death? E.g. children, and/or former spouse/partner.**

Did the deceased inherit any money within 5 years of his death	YES / NO
Had the deceased executed an enduring power of attorney?	YES / NO

**\*may we remind you that you should check the insurance position of the deceased's car before using it\***

#### **9. ANY OTHER INFORMATION**

**Please let us have any other points or information that you think would be of assistance.**

**If you would like us to use particular pronouns for any of the parties referred to in this questionnaire, please provide the information below.**