

John Fowlers LLP - Will Questionnaire

Your Full Name: *

Your Spouse's or
Partner's Full Name: *

Your Address: *

Telephone Number: *

Is this your first Will: * Yes/No (*please circle*)

Date and location of last Will: *
(If applicable)

1. Your Assets

This includes what the residuary estate would comprise of and it is also used as a guide to indicate whether you require Inheritance Tax advice.

Property: * Value £ Joint Tenants / Tenants in Common (*please circle*)

Mortgage outstanding: *

Savings: *

Investments: *

Stocks/ Shares: *

Pensions: *

Life Insurance: *

Any other assets
and/ or foreign assets: *

2. Your Executors

These are the people who oversee the Will being put into effect. (This could be your husband/ wife, adult children, relatives, friends or Solicitor). We recommend that you appoint at least two Executors to deal with your Estate. (You can appoint one Executor initially, but it is advised that you have a replacement).

Full Name (1st Executor): *

Address: *

Relationship (if any): *

Full Name (2nd Executor): *

Address: *

Relationship (if any): *

Full Name of
Replacement Executor: *

Address: *

Relationship (if any): *

3. Your Specific Gifts

This includes gifts of money or possessions to any specific person or Charity. Please state the item/s or amount of money you wish to leave and to whom and include their full name and address and also their relationship to you (if applicable). (Please continue on separate sheet if required).

Item / sum of Money: *

Full Name of person
receiving gift: *

Address: *

Relationship (if any): *

Item / sum of Money: *

Full Name of person
receiving gift: *

Address: *

Relationship (if any):

4. Your Residuary Estate

This is your pot which is left over after all debts, liabilities and funeral expenses have been paid. Please state your Beneficiaries who you wish to inherit your Residuary Estate in the first instance; this could be one person or various people. (If leaving to more than one person please make sure the proportions calculate to 100% in total). (If including minors please state age of inheritance e.g. 18, 21 or 25)

Proportion (e.g. 100%): *

Full Name of Beneficiary: *

Address: *

Relationship (if any): *

Proportion: *

Full Name of Beneficiary: *

Address: *

Relationship (if any): *

5. Your substitute Beneficiaries

If your beneficiaries predecease you, please state a subsequent beneficiary or beneficiaries you would want to inherit your Residuary Estate or a share of it. (If including minors please state age of inheritance e.g. 18, 21 or 25)

Proportion: *

Full Name of subsequent Beneficiary: *

Address: *

Relationship (if any): *

Proportion: *

Full Name of subsequent Beneficiary: *

Address: *

Relationship (if any): *

6. Guardians

If you have children under the age of 18 and you are predeceased by your partner this section allows for you to appoint Guardians to look after your child/ren.

Full Name of Guardian: *

Address: *

Relationship (if any): *

Full Name of Guardian: *

Address: *

Relationship (if any): *

7. Your substitute Guardians

If your nominated Guardians shall predecease you please state replacement Guardians that you would want to look after your child/ren.

Full Name of substitute Guardian: *

Address: *

Relationship (if any): *

Full Name of substitute Guardian: *

Address: *

Relationship (if any): *

8. Your Funeral wishes

This section expresses your wishes which are not binding however. You can state anything you may want for your funeral or you can express whether you want to be buried or cremated.