

**ESTATE PLANNING FORM**

**Client Information**

Today's Date: \_\_\_/\_\_\_/\_\_\_

Name: \_\_\_\_\_ Date of Birth: \_\_\_/\_\_\_/\_\_\_

Address: \_\_\_\_\_

County of Residence: \_\_\_\_\_ Since: \_\_\_/\_\_\_/\_\_\_

Home Phone: \_\_\_\_\_ Cell: \_\_\_\_\_ E-mail: \_\_\_\_\_

U.S. Citizen: Yes  No  If not, citizen of \_\_\_\_\_

Immigration Status: \_\_\_\_\_ Veteran? Yes  No

Employer: \_\_\_\_\_ Since: \_\_\_/\_\_\_/\_\_\_

**MARRIAGE INFORMATION**

Were you previously married? Yes  No

IF YES:

Date of Previous Marriage: \_\_\_/\_\_\_/\_\_\_

Name of Former Spouse: \_\_\_\_\_

Date of Divorce: \_\_\_/\_\_\_/\_\_\_ OR, if spouse is deceased, date of death: \_\_\_/\_\_\_/\_\_\_

If you were married more than once before, please check this box and include this same information, including information about children as below, on the back of this sheet or separately.

**Children Information**

(\*If child is adopted, please indicate as such)

Oldest Child: \_\_\_\_\_ Date of Birth: \_\_\_/\_\_\_/\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

Child's Spouse: \_\_\_\_\_

If any of their children should be named in the Will, please name ALL their children:

\_\_\_\_\_

Next Born Child: \_\_\_\_\_ Date of Birth: \_\_\_/\_\_\_/\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

Child's Spouse: \_\_\_\_\_

If any of their children should be named in the Will, please name all of them:

\_\_\_\_\_

Next Born Child: \_\_\_\_\_ Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

Child's Spouse: \_\_\_\_\_

If any of their children should be named in the Will, please name all of them:

\_\_\_\_\_

If you have more children, check this box and write information on the back.

If you have other dependents, check this box and write information on the back.

Will any minor children require the appointment of a guardian in the event of your death? Yes  No

Is anyone in your family disabled? Yes  No  If yes, please explain:

\_\_\_\_\_

**Other Family Information**

Do you have an adoptive parent, including a stepparent? Yes  No

If you are providing elder care for a parent (or anyone else), please check this box and describe on the back of this sheet, or separately.

Please list any other relatives such as parents or siblings that might be included in your estate plan, with age, city of residence, and marital status:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Your Health**

Please describe any serious health conditions:

\_\_\_\_\_

\_\_\_\_\_

**Income**

Please list all sources of regular or expected income, with brief explanation and approximate monthly amount, including salary, investments, social security, etc.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_



Description and Address of Property#3 \_\_\_\_\_

Purchase Date \_\_/\_\_/\_\_\_\_ Name(s) on Deed \_\_\_\_\_

Purchase Price \_\_\_\_\_ Amount Owed \_\_\_\_\_ Approx. Value \_\_\_\_\_

**Business**

Do you have any interest in any business? Yes  No

If yes, name of business(es) and description of interest:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Digital Assets**

Do you have any digital assets, or anything accessible primarily or exclusively online that has value? Yes  No

If yes, please describe:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Do you have any email or other social media-type accounts you want your estate to access if you become incapacitated or after your passing? Yes  No

If yes, please describe:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Do you have any other online accounts you want your estate to access if you become incapacitated or after your passing? Yes  No

If yes, please describe:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Insurance**

Do you have a Life Insurance Policy? Yes  No

If yes, please list by name of company, whole or term, beneficiary and amount:

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Do you have Long Term Care Insurance? Yes  No

If yes, brief description:

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Do you expect an inheritance in the next 5-10 years? Yes  No

Are you the beneficiary of any trust? Yes  No

If so, please describe: \_\_\_\_\_

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**Personal Property** (Autos, Recreational Vehicles, Artwork, Antiques, Heirlooms, Jewelry, Collections, etc.)

Please list all property, such as vehicles, that have a title to them (with the name of any joint owner in parentheses), as well as any valuables that would be named specifically in your will, including approximate value and amount owed, if any:

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**Liabilities**

Please list any significant debts associated with your estate (excluding those listed above), e.g., student loans, personal loans, credit cards, etc. including amounts:

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**Current Legal Documents**

Do you currently have a Will? Yes  No  If yes, date: \_\_\_/\_\_\_/\_\_\_

Date Executed                      Individual/s Named

Power of Attorney                      \_\_\_\_\_

Living Will/Health Directive                      \_\_\_\_\_

Trusts you have executed or for which you are trustee:

Name of Trust: \_\_\_\_\_ Date Executed: \_\_\_/\_\_\_/\_\_\_

Type: \_\_\_\_\_ Trustee(s): \_\_\_\_\_

Beneficiaries: \_\_\_\_\_ Trust Assets: \_\_\_\_\_

Essential Terms: \_\_\_\_\_

Name of Trust: \_\_\_\_\_ Date Executed: \_\_\_/\_\_\_/\_\_\_

Type: \_\_\_\_\_ Trustee(s): \_\_\_\_\_

Beneficiaries: \_\_\_\_\_ Trust Assets: \_\_\_\_\_

Essential Terms: \_\_\_\_\_

Location of important papers (notes/deeds/etc): \_\_\_\_\_

I am the legally appointed guardian of \_\_\_\_\_

I am serving as a power of attorney for \_\_\_\_\_

I am executor of the following estates: \_\_\_\_\_

I am involved in the following lawsuits: \_\_\_\_\_

Other considerations relevant to my estate and family interests:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### **Intended Beneficiaries**

If there is anyone not mentioned in this questionnaire to whom you may wish to leave property in your Will, please list their full names and relationship to you:

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### **Choosing a Personal Representative**

A personal representative is the individual who oversees and carries out the provisions of a will. The job includes creating an inventory of all assets and liabilities in the estate, filing documents with the court, paying any debts or taxes that must be paid, determining what and how much is due to each beneficiary named in the Will and delivering to each what is intended for them.

You should choose a Personal Representative who, given the responsibilities and the emotions involved, will best serve in this role. You should also choose at least one and perhaps two back-up options should the first (or second) choice be unavailable or unwilling. We will discuss this at our meeting.

### **Digital Assets, Online Accounts**

Management of digital assets and online accounts by anyone other than the owner or account holder is tricky. Generally, each online account has its own terms of service that often includes unique rules about such access, so you may need to familiarize yourself with those.

Anyone with online accounts should consider using a service such as Lastpass.com to collect your passwords in one place even as they may change and that can provide for how these accounts may be accessed by others when necessary.

Another recommended service is everplans.com, which keeps all your important information related to all areas of your life in one place, so it can be available should the need arise.