

# Worksheet 9

## Will planning

This Worksheet is intended to:

- assist you in compiling information to take to your solicitor when you wish to make your Will
- assist in making you aware of decisions you will need to make and to help you make them.

After completing the Worksheet you will be ready to contact a solicitor of your choice to make the Will. This Worksheet does not give any legal advice. To draft a Will, you need to see a qualified solicitor.

### Personal and family particulars

Full Name \_\_\_\_\_

Address \_\_\_\_\_

Occupation \_\_\_\_\_

Home Tel. No. \_\_\_\_\_ Work Tel. No. \_\_\_\_\_

Mobile No. \_\_\_\_\_

Date of Birth \_\_\_\_\_ Place of Birth \_\_\_\_\_

Nationality/Domicile \_\_\_\_\_

Marital Status \_\_\_\_\_

Date of Marriage \_\_\_\_\_ Place of Marriage \_\_\_\_\_

Have you or your spouse been married before? \_\_\_\_\_

National Insurance Number: \_\_\_\_\_

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## If married

Spouse's full name \_\_\_\_\_

Address \_\_\_\_\_

Home Tel. No. \_\_\_\_\_ Work Tel. No. \_\_\_\_\_

Mobile No. \_\_\_\_\_

Date of Birth \_\_\_\_\_

Place of Birth \_\_\_\_\_

Nationality/Domicile \_\_\_\_\_

## Children

All children of either spouse.

Name	Age	Any Disability?
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Who should be guardian if under 18? \_\_\_\_\_

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Any other dependents—for example, elderly parents?

Name \_\_\_\_\_

Address \_\_\_\_\_

Relationship \_\_\_\_\_

## Assets

Do you own your own home?  Yes  No

If Yes, is it in joint names?  Yes  No

If Yes, are you aware if the title is held as joint tenants?  Yes  No  Don't Know

Is there a mortgage secured over the property?  Yes  No

If Yes, what is the outstanding balance? \_\_\_\_\_

Do you have any protection policy, for example?

Life Insurance in place?  Yes  No

If Yes, is it in joint names?  Yes  No

If Yes, is the policy assigned to the lender or will it form part of your estate upon your death?

\_\_\_\_\_

Do you have any other heritable property, for example, house/land?  Yes  No

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If Yes, is it in your joint names?     Yes     No

If Yes, are you aware if the title is held as joint tenants?     Yes     No     Don't Know

Is there a mortgage secured over the property?     Yes     No

If Yes, what is the outstanding balance? \_\_\_\_\_

Is the other property in the UK?     Yes     No

If No, in which Country is it in? \_\_\_\_\_

Do you own:     Jointly     Solely

Approximate Value \_\_\_\_\_

Jewellery \_\_\_\_\_

Household Contents (for example, furniture) \_\_\_\_\_

\_\_\_\_\_

Antiques \_\_\_\_\_

Car \_\_\_\_\_

Boat \_\_\_\_\_

Do you have pension arrangements?     Yes     No

If so, details: \_\_\_\_\_

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Is there provision for the surviving spouse /partner/dependents?  Yes  No

Is there a Death-in-Service benefit?  Yes  No

If so, is there an up-to-date nomination in place?  Yes  No

Is the benefit nominated to a trust already?  Yes  No

Are you a beneficiary of any trust?  Yes  No

If so, please provide details. \_\_\_\_\_

Please complete the following for yourself and, if applicable, again for your spouse.

Cash deposits, for example, in Banks or Building Societies.

Name of Bank(s):

_____	£ _____
_____	£ _____
_____	£ _____
_____	£ _____
_____	£ _____

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Life insurance:

Name(s) of Insurance Company (Companies)

\_\_\_\_\_ Sum Insured \_\_\_\_\_ £ \_\_\_\_\_

\_\_\_\_\_ Sum Insured \_\_\_\_\_ £ \_\_\_\_\_

\_\_\_\_\_ Sum Insured \_\_\_\_\_ £ \_\_\_\_\_

\_\_\_\_\_ Sum Insured \_\_\_\_\_ £ \_\_\_\_\_

\_\_\_\_\_ Sum Insured \_\_\_\_\_ £ \_\_\_\_\_

Are these Policies written in trust?  Yes  No

Are these Policies assigned to anyone?  Yes  No

Stocks and Shares:

Quantity \_\_\_\_\_ Description \_\_\_\_\_ Value \_\_\_\_\_

Quantity \_\_\_\_\_ Description \_\_\_\_\_ Value \_\_\_\_\_

Quantity \_\_\_\_\_ Description \_\_\_\_\_ Value \_\_\_\_\_

Quantity \_\_\_\_\_ Description \_\_\_\_\_ Value \_\_\_\_\_

Are these in certificated form or held in a Nominee Company \_\_\_\_\_

Where are these held? \_\_\_\_\_

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Business interests:

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Distribution of estate:

Specific Legacies (items you wish to leave) \_\_\_\_\_

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Beneficiary \_\_\_\_\_

(for example, items or house etc.)

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Pecuniary Legacies (sums of money you wish to leave) \_\_\_\_\_

Beneficiary \_\_\_\_\_

(for example, sums of money)

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How do you wish to leave the residue? (for example, the rest of the estate)

\_\_\_\_\_

If any part of the estate is to be left to a beneficiary who is below the age of 18, or has a learning disability, do you wish to set up a trust?     Yes     No

Funeral instructions:

Do you wish to be buried or cremated? \_\_\_\_\_

Where? \_\_\_\_\_

Do you wish a religious service? \_\_\_\_\_

If so, who do you wish to conduct it? \_\_\_\_\_

Any special requests regarding the service? \_\_\_\_\_

Do you wish there to be a reception after the service? \_\_\_\_\_

If so, where?

\_\_\_\_\_

\_\_\_\_\_