

making a will

pre-interview questionnaire



hodge jones & allen
solicitors



Making a will - pre-interview questionnaire

This form enables you to provide us with the essential information we require in order to prepare your will. Not all of this form will relate to your circumstances. Please complete the form to the best of your ability. Once you have completed this form, please return it by post or email prior to your appointment. At our meeting, we will have all the information to be able to discuss your specific circumstances and wishes, leaving us with a complete picture of your situation so that we are able to tailor an individual will to suit you.

If you are unsure as to how to complete any part of this form or wish to discuss an issue in detail, we would be happy to go through this with you at our meeting.

Should your spouse or partner also wish to make a will, we are able to offer a reduced rate for the preparation of two wills in similar terms.

A. Personal Details

Full Name (including title and any middle names)

Any other name by which you are known

Do you own any assets in this alternative name?

Yes

No

Date of birth (Day / Month / Year)

Place of birth (City / Country)

Occupation

Nationality

National Insurance Number

Domicile

Home address

Home telephone number

Work telephone number

Mobile telephone number

Email address



B. Relationship Details

Your current marital status (tick one)

- Never been married
- Married
- Divorced
- Widowed
- Married but separated
- Civil partnership
- Cohabiting

Date of marriage or civil partnership

Full name and address of spouse/civil partner/cohabitant

Please state any other names by which your spouse/civil partner/cohabitant is known

Date of birth of your spouse/civil partner/cohabitant

Place of birth of your spouse/civil partner/cohabitant

If you are not married/in a civil partnership, but you are living with a partner, state the date you started co-habiting

If you are not married/in a civil partnership, please indicate if you are contemplating marriage/civil partnership or if you are engaged to be married/intend to enter a civil partnership?

If married/in a civil partnership, are you contemplating divorce?

If you have been divorced, was there a Court Order dealing with the finances? If so, please provide a copy.

Are you making maintenance payments? Please provide a copy of the Court Order (if not included in the Order above)

Yes No

Have you been widowed?

Yes No

If so, please provide a copy of any will that was left by your spouse. Please state the date of your spouse's death.

Has your current spouse/civil partner been married previously?

Yes No

Has your current spouse/civil partner been widowed prior marrying you?

Yes No

Please add any applicable comments



C. Children

How many children do you have?

Please specify the full name, address and date of birth of each child

Name
Address

Own child Step child Other

D.O.B.
Name of other parent

Name
Address

Own child Step child Other

D.O.B.
Name of other parent

Name
Address

Own child Step child Other

D.O.B.
Name of other parent

Name
Address

Own child Step child Other

D.O.B.
Name of other parent

Name
Address

Own child Step child Other

D.O.B.
Name of other parent

If any of your children are adopted please provide the date of adoption

Please state if any of your children are in education and/or still reside with you



D. Grandchildren

Please provide the full name, address and date of birth of any grandchildren you have, together with the names of their parents.

Grandchild 1 D.O.B. Parents:	
Grandchild 2 D.O.B. Parents:	
Grandchild 3 D.O.B. Parents:	
Grandchild 4 D.O.B. Parents:	
Grandchild 5 D.O.B. Parents:	



E. Your Assets

If there is not enough room on this page, please give details on a separate sheet. If any of the assets are jointly held, please specify who the joint owner is and the proportion you own (ie 50/50, or 75/25).

ASSET	DESCRIPTION	Value
Home	Address	Value
		Jointly held?
		Yes <input type="checkbox"/> No <input type="checkbox"/>
		Name of joint owner

Is it mortgaged? Yes No

How much is the capital outstanding on the mortgage?

If the property is not mortgaged, where are the deeds?

Second property	Address	Value
		Jointly held?
		Yes <input type="checkbox"/> No <input type="checkbox"/>
		Name of joint owner

Is it mortgaged? Yes No

How much is the capital outstanding on the mortgage?

If the property is not mortgaged, where are the deeds?

Stocks and shares / Unit trusts	Holding	Value	Jointly held?		Name of joint owner
			Yes	No	
	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>

Where are the share certificates?



ASSET	DESCRIPTION	VALUE	JOINTLY HELD?		NAME OF JOINT OWNER
			Yes	No	
Bank accounts	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
Building society accounts	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
National Savings accounts or products	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
Life policies (if any of these are written in trust, please say so)	<input type="text"/>		Value <input type="text"/>		Jointly held? Yes <input type="checkbox"/> No <input type="checkbox"/>
			On your life only? Yes <input type="checkbox"/> No <input type="checkbox"/>		
Pensions (any state or occupational pensions you currently receive or you are entitled to in the future)	<input type="text"/>		Value <input type="text"/>		Are you drawing any private pension now? Yes <input type="checkbox"/> No <input type="checkbox"/>
Death in service benefit	<input type="text"/>		Value <input type="text"/>		



ASSET

DESCRIPTION

Agricultural assets
(Please specify if buildings are not occupied by farm worker)

Value

Jointly held?
Yes No

Name of joint owner

Do you own any property occupied by a third party?

Value

Jointly held?
Yes No

Name of joint owner

Do you have any foreign assets?

Value

Jointly held?
Yes No

Name of joint owner

Personal chattels
(Please specify any items of value held, such as furniture or jewellery)

Value

Value

Value

Value

Value



ASSET

DESCRIPTION

Do you own any other assets, you have not yet mentioned?

[Large empty text box for asset description]

Value

[Value input box]

Jointly held?

Yes No

Name of joint owner

[Name of joint owner input box]

Are you currently a beneficiary of a trust or are you due to inherit in the future?

(Please provide details of Solicitors/Trustees involved and details of the assets held in trust)

[Large empty text box for trust details]

Have you inherited from a deceased person's estate in the last two years?

Yes No

If yes, please state date of death

[Date of death input box]

Have you made any gifts (either in money or assets)? If so please provide details and the date on which the gift was made.

[Large empty text box for gift details]

Debts
List individually with amounts (do not include any mortgage referred to above)

[Debt description input box 1]

Value

[Value input box 1]

[Debt description input box 2]

Value

[Value input box 2]

[Debt description input box 3]

Value

[Value input box 3]

[Debt description input box 4]

Value

[Value input box 4]



Business Assets

Do you own any business interests/assets?

Yes No

Name of business

Business structure

- Sole trader
- Partnership
- Private company
- Limited company

Nature of the Business, eg trading, investment etc

Your interest in the business

Value of your business interest

Who owns the business? Eg shareholders and their proportions

Are there business assets held outside of the business structure eg premises?

Yes No

If yes, description of asset

Value

Who owns the asset?

ESTIMATED VALUE OF YOUR ESTATE: £

Is there a memorandum and articles of association?

Yes No

If yes, please provide a copy

Shareholders' agreement ?

Yes No

If yes, please provide a copy

Partnership agreement ?

Yes No

If yes, please provide a copy

What do you envisage happening to the business on your death?

Is there any insurance in place if you should die?

Yes No

If yes, please provide details



F. Other

Who lives in your home?

Do you have any dependants or maintain anyone in any way, either in actual money or monetary value? If so please provide details

G. Previous Wills

Have you made a will in the UK before?

Yes No

If yes, please state the date the UK will was made

Who drafted the will?

Where is the original will currently kept?

Do you have a copy? (if so please provide us with a copy)

Do you have an existing foreign will?

If yes, please state the date the foreign will was made

Who drafted the will?

Where is the original will currently kept?

Do you have a copy? (if so please provide us with a copy)

H. Your New Will

Full name & address of your proposed Executors

Executor 1

Relationship to you

Full name & address of substitute Executors
(This is in case your chosen Executors unable or unwilling to act)

Substitute Executor 1

Relationship to you

Full name & address of your proposed Executors

Executor 2

Relationship to you

Full name & address of substitute Executors
(This is in case your chosen Executors unable or unwilling to act)

Substitute Executor 2

Relationship to you



Full name and address of intended guardians of any minor (aged under 18) children you may have

Intended guardian 1	Intended guardian 2
Relationship to you	Relationship to you

Funeral or burial requirements

If you would like information on arranging a pre-paid funeral plan, please tick here.

Specific gifts: (Please state items (if any) you wish to give specifically in your will.)

Gift Description	Free of inheritance tax	
1 <input type="text"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
2 <input type="text"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
3 <input type="text"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
4 <input type="text"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
5 <input type="text"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
6 <input type="text"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>

(please continue on a separate sheet if necessary)

If you are giving instructions as a married couple/civil partnership, state on which death the legacy is to take effect.

1st 2nd

Legacies (ie specific sums of money)

Full name and address of legacy recipients (date of birth if recipient is under eighteen)

1 Name and Address	2 Name and Address	3 Name and Address
D.O.B. Amount	D.O.B. Amount	D.O.B. Amount

If you are giving instructions as a married couple/civil partnership, state on which death the legacy is to take effect.

1st 2nd

How old is the recipient to be before they inherit (if they are now under 18)?

18 21 25 Other (please state)



I. Residue of Estate

Please specify who will take the rest of your estate

Name & address

Amount
Proportion or %

Age
at which they
inherit if under 18

1		
2		
3		

Please state who will inherit if neither your family nor those listed above survive you.

--	--	--

Signed

Name

Date



What happens next?

On completion of this questionnaire, you will need to arrange a short (up to 1 hour) appointment with a will drafting specialist. This time will be constructively spent understanding exactly how you want your estate to be distributed at your death and discussing any further issues that may arise such as inheritance tax, etc. We will then prepare the will for you. We offer a safe and secure wills storage facility where your will can be placed at no extra charge.

Contact: Sarah Boulter Direct Tel: 020 7874 8559
Fax: 020 7874 8303 Email: sboulter@hja.net

Main Tel: 020 7874 8300
Website: www.hja.net

Online wills register with Certainty.co.uk

We are now able to provide a service to register your will with Certainty.co.uk, the new National Wills Register. This secure online database keeps a record of where your will is held and allows family members to locate a will after death. As changes in circumstances can often mean that people are unaware of the location of a family member's will or that a new will has been made, this service offers peace of mind that your wishes will be respected. Please ask us for more information about this service.

Other services

Our private client specialists can also offer advice on the following:

- Estate management (probate)
- Inheritance tax planning
- Lasting powers of attorney / powers of attorney/Court of Protection applications
- Wills and probate disputes

Hodge Jones & Allen LLP also has specialist legal teams in civil litigation, family law, personal injury and clinical negligence compensation claims, criminal defence, housing law and civil liberties / public law.

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