



**PLEASE ANSWER ALL APPLICABLE QUESTIONS IN FULL**

## YOUR DETAILS

<p><b>Full Name</b> (including any middle names):</p>	
<p><b>Address:</b></p>	
<p>Home Telephone number:</p>	
<p>Mobile Telephone Number:</p>	
<p>Email:</p>	
<p>Occupation:</p>	
<p>Date of birth:</p>	
<p>Have you already made a Will or Codicil?</p>	<p><input type="checkbox"/> YES <input type="checkbox"/> NO</p> <p><b>If yes, provide a copy.</b></p>
<p><b>Are you married or in a civil partnership?</b></p>	<p><input type="checkbox"/> YES <input type="checkbox"/> NO</p> <p>If yes, please provide your spouse/civil partner's full name and address: Full Name: Address:</p>

<p>Have you been married or civil partnered before?</p>	<p><input type="checkbox"/> YES <input type="checkbox"/> NO</p> <p>If yes, please provide your ex-spouse/civil partner's full name and address: Full Name: Address:</p>
<p>If yes, how did the marriage/civil partnership end?</p>	<p><input type="checkbox"/> DIVORCE / CIVIL PARTNERSHIP DISSOLUTION <input type="checkbox"/> WIDOWED <input type="checkbox"/> SEPARATED BUT NOT DIVORCED <input type="checkbox"/> OTHER (give details below)</p> <p><b>If applicable please provide a copy of your financial order to us. This is required as it may affect your options and our advice.</b></p>
<p>Have you married or formed a civil partnership since you made your last Will?</p>	<p><input type="checkbox"/> YES <input type="checkbox"/> NO</p>
<p><b>If you are <u>not</u> married/civil partnered,</b> are you expecting to get married or enter into a civil partnership in the near future?</p>	<p><input type="checkbox"/> YES <input type="checkbox"/> NO</p>
<p>Are you now, or have you ever been financially connected to someone else – for example through joint ownership of property, or cohabitation?</p>	<p><input type="checkbox"/> NO <input type="checkbox"/> YES - my spouse/civil partner only. <input type="checkbox"/> YES - someone else</p> <p>If yes - someone else, please provide that person's full name, address and details of your financial connection to them: Full Name: Address:</p> <p>Details:</p>

## CHILDREN

Do you have any children?

YES  
 NO

If yes, please provide their full names, addresses and ages (ie their date of birth).

Child One:

Full Name:

Address:

Child One DOB:

Child Two:

Full Name:

Address:

Child Two DOB:

Child Three:

Full Name:

Address:

Child Three DOB:

Child Four:

Full Name:

Address:

Child Four DOB:

## GUARDIANS

If your children are under 18 and both their parents pass away,  
**who do you want to look after your children?**

These people are known as 'Guardians'

Name:

Address:

Relation to you:

## DOMICILE

Are you domiciled in England and Wales?

YES  
 NO

If no, where are you domiciled?

## FUNERAL WISHES OR DISPOSAL OF BODY

Please select which option you would like to include in your Will.

Buried  
 Cremated  
 I do not wish to include this in my Will

**We will discuss your options in our meeting.**

## EXECUTORS

These are the people responsible for arranging your funeral and distributing your estate

Who would you like to appoint as your Executor(s)?

### **Executor One**

Full Name:

Address:

Relationship to you:

### **Executor Two**

Full Name:

Address:

Relationship to you:

I want to have more Executors

If you want more than two Executors, please provide details on page 10.

## SUBSTITUTE EXECUTORS

If the above Executors do not act, who do you want as your substitute Executors?

### Substitute Executor One

Full Name:

Address:

Relationship to you:

### Substitute Executor Two

Full Name:

Address:

Relationship to you:

When should your substitute Executors step in to act?

Only when ALL primary Executors cannot act

**OR**

As soon as any one Executor cannot act

## PERSONAL POSSESSIONS

Do you want to specifically gift any personal possessions

YES  
 NO

(such as jewellery, ornaments, keepsakes etc)

**We will discuss your options in our meeting.**

## PETS

Do you want to make provision for what will happen to pet(s) when you die?

YES  
 NO  
 N/A

**We will discuss your options in our meeting.**

## CASH GIFTS & LIFETIME GIFTS

Do you want to make any cash gifts in your Will?

- YES  
 NO

If yes,  
please provide:

- **Amount of each gift**
- **Full name of recipient**
- **Address**
- **Date of birth**

Cash Gift 1:

Cash Gift 2:

Cash Gift 3:

Cash Gift 4:

I want to include more cash gifts

If you want more than four cash gifts, please provide details on page 10.

Please list any gifts you have made  
**over £250 in the last 7 years**

This includes items of value such  
as jewellery or paintings

Please give details of:

- **Amount of gift**
- **Date given**
- **Recipient's relation to you**

# GIFT OF LAND AND BUILDINGS

Your property will usually be included as part of your whole estate.

Only complete this section if you want to gift it separately.

Do you wish to gift a property separately?	<input type="checkbox"/> YES <input type="checkbox"/> NO  <b>If no, move on to the next section.</b>
If yes, please provide details:	Property address:  Full Name of recipient: Recipient's address:  Relationship to you:
How do you want to gift the property?	<input type="checkbox"/> To the recipient outright  <b><u>OR</u></b>  <input type="checkbox"/> Only to live in during their lifetime, then to: <input type="checkbox"/> My children equally <input type="checkbox"/> Someone else (provide details below)  Full Name: Address:  Relationship to you:  <b>We will discuss this further in our meeting.</b>

# GIFT OF RESIDUARY ESTATE

Your 'Residuary Estate' is what is left after all the other gifts, tax, funeral and administrative expenses are paid.

Who do you want to inherit your estate?

- 100% to spouse/civil partner/partner  
 Then to my children in equal shares

**OR**

- Divide equally between my children

**OR**

- Other (give details below)

If Other, please give details of the following for each beneficiary:

- **Percentage of gift**
- **Full Name**
- **Address**
- **Date of birth**
- **Relationship to you**

Beneficiary 1:

Beneficiary 2:

Beneficiary 3:

Beneficiary 4:

- I want to include more residuary beneficiaries

If you want more than four beneficiaries, please provide details on page 10.

If any of the above beneficiaries die before you,

**Do you want their gift to pass to their children instead?**

- YES  
 NO



# FINAL GIFT OF RESIDUARY ESTATE

This gift is often made to charity, or 50% to one side of the family and 50% to the other

If ALL the gifts on page 8 cannot take effect (for example if beneficiaries pass away before you):

**Who do you want to inherit your estate?**

Do not make any further provision

**OR**

Charity(ies)

**OR**

Other (give details below)

If Charity or Other, please give details of the following for each beneficiary:

- **Percentage of gift**
- **Name**
- **Address**

if applicable

- **Date of birth**
- **Relationship to you**

Beneficiary/Charity 1:

Beneficiary/Charity 2:

I want to include more final residuary beneficiaries

If you want more than two beneficiaries, please provide details on page 10.

# ENDURING OR LASTING POWER OF ATTORNEY

**Do you have a Power/Powers of Attorney?**

This may be an Enduring Power (EPA) or Lasting Powers of Attorney (LPAs).

Please tick ALL that apply

- YES: EPA
- YES: LPA - Property & Finances
- YES: LPA - Health & Welfare
- NO

## WILL STORAGE

As a Will is a legal document and the original signed copy may need to be sent to the court following your death, it is vital that it is kept safe. If your Will is damaged in any way, then the court could declare the Will invalid. As part of our ongoing support to clients, we offer a Wills storage service, for a one-off fee of £50 + VAT.

Would you like BakerLaw to store your original Will once it has been signed?

YES  
 NO

## ANY OTHER DETAILS

Please provide details of any **additional information from earlier questions**

**OR**

Details of anything else you think we should know.

# FINANCIAL INFORMATION

We need this information to advise you on Inheritance Tax.

<b><u>ASSETS</u></b>	<b>Details</b>	<b>Value/Share</b>
<p><b>Home</b></p> <p>Do you own this property?</p> <p>How is the property owned?</p> <p>Please provide details of your % share and its value.</p>	<p>Address:</p> <p><input type="checkbox"/> YES <input type="checkbox"/> NO</p> <p><input type="checkbox"/> Jointly <input type="checkbox"/> Solely</p>	<p>% of property owned: _____ %</p> <p>Value: £</p>
<p><b>Other property(ies)</b></p>	<p>Address 1:</p> <p>Address 2:</p>	<p>% of property owned: _____ %</p> <p>Value: £</p> <p>% of property owned: _____ %</p> <p>Value: £</p>
<p><b>House contents - total combined value</b></p>		
<p><b>Bank/building society accounts</b></p> <p>Please give value of all accounts:</p>	<p>ALL accounts total</p>	<p>£</p>

<p><b>Investments</b> (shares, NS&amp;I etc)</p> <p>Please give value of all accounts:</p>	<p>ALL accounts total</p>	<p>£</p>
<p><b>Pensions/Benefits</b></p> <p>Please give value of all pensions/policies</p>	<p>ALL pensions/benefits total</p> <p>Have these been nominated to be paid to someone specific on your death?</p>	<p>£</p> <p><input type="checkbox"/> YES <input type="checkbox"/> NO</p>
<p><b>Foreign assets</b></p> <p>Please give value of all assets:</p>	<p>ALL foreign assets total</p>	<p>£</p>
<p><b>Agricultural assets</b></p> <p>Please give value of all assets:</p>	<p>ALL agricultural assets total</p>	<p>£</p>
<p><b>Business assets</b></p> <p>Please give value of all assets:</p>	<p>ALL business assets total</p>	<p>£</p>
<p>Property held in trust under which you are a beneficiary</p>	<p>Property address: Details of trust:</p> <p>Property address: Details of trust:</p>	<p>% of property interest : ____%</p> <p>£</p> <p>% of property interest : ____%</p> <p>£</p>

<b><u>LIABILITIES</u></b>	<b>Details</b>	<b>Outstanding amount</b>
<b>Mortgages</b>	<u>Address 1:</u> Mortgage Amount	£
	<u>Address 2:</u> Mortgage Amount	£
<b>Bank loans</b>  Please give value of all loans:	ALL loans total	£
<b>Overdrafts</b>  Please give value of all overdrafts:	ALL overdrafts total	£
<b>Credit card balances</b>  Please give value of all credit cards:	ALL overdrafts total	£
<b>Other</b>  Please give value of all other liabilities	ALL other liabilities totals:	£

Please return this form to us by either email to [privateclient@baker-law.co.uk](mailto:privateclient@baker-law.co.uk) or by post to BakerLaw LLP, Gostrey House, Union Road, Farnham, Surrey, GU9 7PT.

# Thank You!

We will review your questionnaire and contact you within 7 working days.