

# PHILIP J MILTON & COMPANY PLC

## WILL DRAFTING QUESTIONNAIRE

I should be grateful if you would take the time to complete the sections you feel are relevant to your new Will as this will help to speed up the process of preparing the draft of your new Will(s). **Please use black ink.** Thank you. Please do add any extra details which you believe could be valuable to our planning. There is a continuation sheet at the end of this Questionnaire for this purpose. If using this, please note the relevant question number alongside the additional information supplied.

### 1. YOUR PERSONAL DETAILS

**You**

**Your spouse/partner**

Full Name:..... Full Name:.....  
.....

Is your spouse/partner's Will to be a mirror Will? N/A ☐

Yes ☐ No ☐

If yes, only one questionnaire is required to be completed.

If no, then a second questionnaire may be necessary and we shall be happy to supply this upon request.

**2. MARRIAGE/PARTNERSHIP DETAILS:** N/A ☐ (please go to Q3)

As a Will is invalidated by marriage, civil partnership or divorce, the following points are important to consider:

- (a) Please tick this box if you are not married/in civil partnership ☐
- (b) Please tick this box if you intend your Will to still have effect in the event of an forthcoming marriage/civil partnership ☐
- (c) Please tick this box if you are currently separated and intend your Will to still have effect in the event of divorce/dissolution of civil partnership ☐
- (d) Please tick this box if you have been widowed previously\* ☐

\*(This may have Inheritance Tax implications for your own Estate. Please forward a copy of the closing Estate summary and Will if you would like further guidance, unless this Firm assisted in the Probate)

If you require a recital in the Will to address a former spouse/civil partner's claim on your Estate, please contact us to discuss further. Details of any court order and the contact details of the Solicitor that represented you would be required. A copy of these details are recommended to be stored with the Will in case of challenge.

3. Your children - full names, dates of birth, addresses and postcodes.

N/A ☐ (please go to Q5)

**Name:** .....

**D.O.B.** .....

**Address:** .....

.....

Please tick if: ☐ adopted ☐ fostered ☐ stepchild

**Name:** .....

**D.O.B.** .....

**Address:** .....

.....

Please tick if: ☐ adopted ☐ fostered ☐ stepchild

**Name:** .....

**D.O.B.** .....

**Address:** .....

.....

Please tick if: ☐ adopted ☐ fostered ☐ stepchild

**Name:** .....

**D.O.B.** .....

**Address:** .....

.....

Please tick if: ☐ adopted ☐ fostered ☐ stepchild

If any of your children predecease you, who would you wish to inherit in their stead?

☐ their children ☐ their spouse/partner (please give details under 'additional notes')

**Please note:**

- Illegitimate and adopted children (but not stepchildren) generally have the same rights of inheritance as other children.
- Children excluded from benefit under your Will may have a right to claim a share of your property in certain circumstances. Please ask for advice, if appropriate.

**4. GUARDIANS:**      N/A    ☐    (please go to Q5)

You may want to appoint one or two people to act as guardian(s) for children under 18. Usually, the appointment will only apply if you and the child's other parent are both dead. The position may be different if you are a single parent. Guardianship involves a great deal of responsibility and you should discuss the matter with your chosen guardian(s) to confirm that they agree to act before appointing them.

**Name:** .....

**D.O.B.** .....

**Address:** .....  
.....  
.....

**Name:** .....

**D.O.B.** .....

**Address:** .....  
.....  
.....

**5. EXECUTORS:**

Whom would you wish to appoint as your Executors and Trustees? If you are uncertain what these responsibilities entail please do ask before completing this section.

Please list below your chosen Executors (up to four may be selected):

**Surviving spouse/partner**      ☐

**Please note:** You can also require some of your Executors to be appointed to act only on the second of your deaths. If this is required, please note this by ticking the box for each Executor.

**Second death**

**only**

**Name:** .....

.....

**D.O.B.** .....

**Address:** .....

.....

.....

**Relationship to you:** .....

☐

**Second death only**

**Name:** .....

.....

☐

**D.O.B.** .....

**Address:** .....

.....

.....

**Relationship to you:** .....

**Name:** .....

.....

☐

**D.O.B.** .....

**Address:** .....

.....

.....

**Relationship to you:** .....

**Name:** .....

.....

☐

**D.O.B.** .....

**Address:** .....

.....

.....

**Relationship to you:** .....

As we recommend for impartiality and professional guidance at the time, do you wish to appoint a representative of Philip J Milton & Company Plc in the capacity of either sole or joint Executor?

Yes ☐ No ☐

**6. FUNERAL: you can specify your funeral requirements within a Will**

Burial ☐

Cremation ☐

No preference ☐

**Please note:**

- You should make these wishes known to your immediate family as well and not rely on what is in your Will.
- If you wish to leave any part of your body for medical purposes, inform your family and your doctor and carry a donor card.

## 7. YOUR HOME AND OTHER ASSETS:

### Is your home:

Owned ☐ Rented ☐ Other - e.g. Provided by a relative? ☐

### If your answer was 'Other' please give more details:

.....  
.....

### If your home is owned, is it in:

joint names ☐ your name ☐ other ☐

### If your answer was 'Other' please give more details:

.....  
.....

### If your home is jointly owned, do you know if it is owned as:

Tenants in Common ☐ Joint Tenants ☐ Don't know ☐

### If Tenants in Common, do you know your Title number?

.....

## 8. JOINT ASSETS: ☐ N/A ☐ (please go to Q9)

Please note that many jointly owned assets pass to the surviving owner on first death irrespective of the intentions noted in your Will. The main exception to this is when property is owned as Tenants in Common in which case your intentions via the Will may take effect. This is academic of course if you intend to leave jointly held assets to the surviving owner.

Do you have any jointly owned assets which you specifically would not want to pass to the co-owner? If yes, please give a general description, and their approximate values, and the name(s) of the other owner(s) [unless you have recently completed one of our 'Confidential Client Questionnaires'].

.....  
.....  
.....  
.....

If there is insufficient space to supply details please use the 'additional notes' section at the end of this questionnaire.

**9. Do you own any Assets abroad?**

N/A ☐ (please go to Q10)

You should seek advice from a Firm with expertise in Will writing in the country that the assets are located to establish if a separate Will to cover your overseas assets may be required. Have you already made arrangements in this respect? Please supply further details in the additional notes section.

**Please give details of assets owned abroad:**

.....  
.....  
.....  
.....

**BENEFICIARIES:**

Before attending to the main part of your Estate (dealt with in question 13), are there any specific legacies that you may wish to make to any individuals, charities or organisations? This may involve cash sums or specific personal items. For each gift please also mention what is to happen to the gift if that person passes away before you. In that situation, should the gift form part of the residue of your Estate or pass to an alternative beneficiary? Please supply full details of the alternative beneficiary if not noted separately on this form.

**10. CASH LEGACIES:** N/A ☐ (please go to Q11)

Please give the name, address and postcode of the beneficiary and the amount to be given, with the date of birth of anyone who is under 18. If a Charity, please include the Charity's registered number. If you are one of a couple please specify whether the gift is to apply if you are the first or second to pass away.

	<b>1<sup>st</sup> death</b>	<b>2<sup>nd</sup> death</b>
<b>Name:</b> .....		
.....	<input type="checkbox"/>	<input type="checkbox"/>
<b>D.O.B.</b> .....		
<b>Address:</b> .....		
.....		
<b>Relationship to you:</b> .....		
<b>Amount:</b> .....		
<b>Name:</b> .....		
.....	<input type="checkbox"/>	<input type="checkbox"/>
<b>D.O.B.</b> .....		
<b>Address:</b> .....		
.....		
<b>Relationship to you:</b> .....		
<b>Amount:</b> .....		

	1 <sup>st</sup> death	2 <sup>nd</sup> death
<b>Name:</b> .....		
.....	<input type="checkbox"/>	<input type="checkbox"/>
<b>D.O.B.</b> .....		
<b>Address:</b> .....		
.....		
<b>Relationship to you:</b> .....		
<b>Amount:</b> .....		
<b>Name:</b> .....		
.....	<input type="checkbox"/>	<input type="checkbox"/>
<b>D.O.B.</b> .....		
<b>Address:</b> .....		
.....		
<b>Relationship to you:</b> .....		
<b>Amount:</b> .....		

**11. GIFTS OF CHATTELS** (items of personal property):    N/A   ☐   (please go to Q12)

Please give the names and addresses of those to whom you wish to leave specific items and a full description of the article to enable it to be clearly identified. Please note that if you sell or replace one of these items, the beneficiary will receive nothing - he or she will **NOT** be given the substituted item or the cash equivalent. If you are one of a couple please specify whether the gift is to apply if you are the first or second to pass away.

	1 <sup>st</sup> death	2 <sup>nd</sup> death
<b>Name:</b> .....		
.....	<input type="checkbox"/>	<input type="checkbox"/>
<b>D.O.B.</b> .....		
<b>Address:</b> .....		
.....		
<b>Relationship to you:</b> .....		
<b>Amount:</b> .....		
<b>Name:</b> .....		
.....	<input type="checkbox"/>	<input type="checkbox"/>
<b>D.O.B.</b> .....		
<b>Address:</b> .....		
.....		
<b>Relationship to you:</b> .....		
<b>Amount:</b> .....		

	1 <sup>st</sup> death	2 <sup>nd</sup> death
<b>Name:</b> .....		
.....	<input type="checkbox"/>	<input type="checkbox"/>
<b>D.O.B.</b> .....		
<b>Address:</b> .....		
.....		
.....		
<b>Relationship to you:</b> .....		
<b>Amount:</b> .....		

<b>Name:</b> .....		
.....	<input type="checkbox"/>	<input type="checkbox"/>
<b>D.O.B.</b> .....		
<b>Address:</b> .....		
.....		
.....		
<b>Relationship to you:</b> .....		
<b>Amount:</b> .....		

## 12. THE RESIDUE OF YOUR ESTATE:

For the remainder of your Estate, how is this to be addressed in your Will?

### A. For couples only: (individuals please go to question 12B)

Unless otherwise specified, if any of the recipients predecease you then their share will be divided equally amongst their children or if none then amongst the remaining surviving beneficiaries named in this question.

#### • If I am the first to pass away then I would like everything to pass to:

	Share
My spouse/partner <input type="checkbox"/>	.....
My children named at question 3 equally <input type="checkbox"/>	.....
The person(s)/organisation(s) named below in the proportions stated <input type="checkbox"/>	

**Name:** .....

.....

**D.O.B.** .....

**Address:** .....

.....

.....

**Share:** .....



**Name:** .....  
.....  
**D.O.B.** .....  
**Address:** .....  
.....  
.....  
**Share:** .....

**Name:** .....  
.....  
**D.O.B.** .....  
**Address:** .....  
.....  
.....  
**Share:** .....

- **If I am the second to pass away then I would like everything to pass to:**

		<b>Share</b>
My children named at question 3 equally	<input type="checkbox"/>	.....
The person(s)/organisation(s) named below		
in the proportions stated	<input type="checkbox"/>	

**Name:** .....  
.....  
**D.O.B.** .....  
**Address:** .....  
.....  
.....  
**Share:** .....

**Name:** .....  
.....  
**D.O.B.** .....  
**Address:** .....  
.....  
.....  
**Share:** .....

**Name:** .....  
.....  
**D.O.B.** .....  
**Address:** .....  
.....  
.....  
**Share:** .....

You may choose the age at which any minor beneficiary will receive their entitlement if they are below 18 at the time of your death. **Insert choice** ..... (Minors are legally entitled to benefit from age 18 but if a later age is specified for inheritance then the more onerous Trust Tax provisions could apply in the event).

**B. For individuals:**

Unless otherwise specified, if any of the recipients predecease you then their share will be divided equally amongst their children or if none then amongst the remaining surviving beneficiaries named in this question.

• **I would like everything to pass to:**

		<b>Share</b>
My children named at question 3	<input type="checkbox"/>	.....
The person(s)/organisation(s) named below in the proportions stated	<input type="checkbox"/>	

**Name:** .....  
.....  
**D.O.B.** .....  
**Address:** .....  
.....  
.....  
**Share:** .....

**Name:** .....  
.....  
**D.O.B.** .....  
**Address:** .....  
.....  
.....  
**Share:** .....

**Name:** .....

.....  
**D.O.B.** .....  
**Address:** .....  
.....  
.....  
**Share:** .....

You may choose the age at which any minor beneficiary will receive their entitlement if they are below 18 at the time of your death. **Insert choice** ..... (Minors are legally entitled to benefit from age 18 but if a later age is specified for inheritance then the more onerous Trust Tax provisions could apply in the event)

- 13.** Once the Wills are completed they will need to be signed in the presence of two independent witnesses. This can be arranged in an appointment at our Office or alternatively the Wills can be sent for a home signing. Please indicate which you would prefer

Office signing      ☐                      Home signing      ☐

- 14.** Once the Wills have been signed they can be stored in our Company Strongroom, free of charge. Please indicate below if you require this service

Yes                      ☐                      No                      ☐

- 15.** Do you require a copy of your Will? If so, how many copies? .....

- 16.** Heard about our Company/Recommended by .....

**Thank you for taking the time to complete this questionnaire. Once we have received your questionnaire we shall supply you with a draft to consider and approve, also raising any further questions that may require to be addressed before we can finalise your instructions. Please note that our invoice is typically supplied with the first draft of the Will.**

[illegible]