O'Neill Patient
SOLICITORS LLP

WILL QUESTIONNAIRE

Please read through the form and provide answers to all questions in the spaces provided. If you would like us to produce Mirror Wills for you and your spouse/partner, you only need to complete one form, but you should give your spouse/partner's details where required

QUESTIONS?

ABOUT YOU/YOUR SPOUSE/PARTNER	YOUR ANSWERS
1. Your full name, including any middle names, and that of your spouse/partner if you require Mirror Wills? *(A Mirror Will is where there are two of you and your Wills are the same in reverse i.e. you are leaving your joint estate to the same people when both of you have died)*	
2. Your full address, including post code?	
3. Your contact telephone number? *(The number you would like us to call if we have any questions about your details)*	
4. Your email address? *(Please confirm, yes or no, if you would like your draft Will/s emailed to you for approval)*	
5. Your marital status? *(Single/Married/Divorced/Cohabiting/Civil Partnership)*	
6. Your date of birth, and that of your spouse/partner if you require Mirror Wills?	

7.	If you are not married, or not in a civil partnership do you and your partner intend to marry or register a civil partnership? *(Marriage or registering a civil partnership will revoke your Will/s unless it includes your statement of intention to marry or register a civil partnership. If not included in your Will now, you will require a new Will after marriage or registration of a civil partnership)*	
8.	Are you UK domicile? *(Your domicile is the country you consider to be your permanent home),* If not please confirm your domicile	

	FOREIGN ASSETS	**YOUR ANSWERS**
9.	Do you own any assets outside the UK: If so, please provide brief details of what, where and whether or not you have a Will in that country. *(It is usually best to make a Will in the same country as the assets. If we include them in your UK Will it is not guaranteed your wishes will be achieved because some countries have different laws governing who you may leave property to)*	

YOUR WILL(S)

If you are leaving the whole of your estate to your spouse/partner or just one individual, please answer questions 10 and 11 with regard to your Executor(s), otherwise move on to question 12

DEATH OF FIRST SPOUSE/PARTNER OR LEAVING TO SINGLE PERSON	YOUR ANSWERS
10. If you are making Mirror Wills, are you leaving everything to the other when the first one dies? If you are, do you want the survivor of you to be the Executor? *(An Executor is the person responsible for carrying out the instructions in your Will after your death. They are also responsible to pay any debts and expenses and distribute your estate in accordance with your Will.* *The role of Executor can be complicated and challenging, especially for family members at a time when emotions are exceptionally high. You may wish a professional to deal with the estate)* Would you like O'Neill Patient Solicitors to act as your Executor, either alone or jointly with your spouse/partner to provide support and guidance? We now have to take it one step further and deal with situation of you dying together or being the second to die so please now answer questions 12 onwards.	
11. If you are single or divorced and wish to leave your entire estate to **one** individual, what is their full name and address and their relationship to you? Would you like this person to act as Executor, or would you like O'Neill Patient Solicitors to take care of everything on their behalf or act jointly with that person to provide support and guidance? We now have to deal with the situation of this person dying before you or with you so please now answer questions 12 onwards.	

In all cases where we need more than one Executor, please complete question 12 below – this is when the second of a couple dies or you die together, or where you answered question 11 but the sole beneficiary has died before you, when more than one person is entitled to your estate, where children are beneficiaries, where Charities are beneficiaries etc

EXECUTORS	YOUR ANSWERS
12. Who would you like to look after your affairs upon your death i.e. who will be your Executors? (*The role of Executor can be complicated and challenging, especially for family members. You may wish a professional to deal with the estate)* Would you like O'Neill Patient Solicitors to act as sole Executor, or jointly with a family member or a friend to provide support and guidance? Alternatively please provide the full names and addresses or your Executors? *(Minimum of 2 with a maximum of 4. They must be over the age of 18 and there should be no bankruptcy issues in respect of your Executors but your Executors* ***can*** *benefit under your Will. You should ask them if they are prepared to act because the Will merely nominates their appointment – to be actually appointed they must actively apply to the Probate Registry.* *You should trust your Executors implicity and have total confidence that they will be responsible and be able to agree on joint decisions as they must act unanimously* *If it proves necessary to hold monies for minors (eg grandchildren) the Executors will be responsible for the investment of such monies and will be able to decide whether or not monies are advanced to the children before the specified age ie the Executors will basically "step into your financial shoes"* *As they must act unanimously please ensure you appoint Executors who you believe will get on together).*	

With regard to the distribution of assets in your (or where you have both died, your joint estate) please complete questions 13 to 18 below

SPECIFIC GIFTS	YOUR ANSWERS
13. Would you like to pass on any specific items (such as jewellery) to a specific person? *(You should give sufficient detail to avoid confusion over which particular item you mean)* Please give the beneficiary's full name and address and confirm their relationship to you. Also advise if this person is under 18 and if you would like the item/s retained by the Executors until they attain 18 years.	
14. Are there to be any cash gifts? Please confirm the amount and give the beneficiary's full name and address and confirm their relationship to you. Also advise if this person is under 18 and if you would like the money retained by the Executors until they attain 18 years? You may wish to leave a sum of money to a favoured Charity. Please confirm the amount and the name of the Charity? If you require Mirror Wills, please confirm if the sum is to be paid on **each** death or **once** on the second death?	
15. If any persons you have named above should have died before you, would you like the specific or cash gift to go to that person's children or someone else? If naming children please also confirm if they are to receive the specific or cash gift at 18 years or 21 years of age? Alternatively would you like the specific or cash gift to 'lapse' and fall back in to your estate and be distributed accordingly?	

Moving on to the distribution of the remainder of your estate, known as the Residuary Estate

RESIDUARY ESTATE	YOUR ANSWERS
16. What would you like to happen to the rest of your estate? (*It will normally be passed on (after deduction of debts and funeral expenses) in percentages or alternatively to a 'class' of people i.e. your children or grandchildren or similar.* *Please note that referring to children, the expression will include legitimate, illegitimate, legitimated and adopted children but NOT step- children)* Please give the full names and addresses of persons and please state the ages of any persons under 18 and confirm if you wish them to take at 18 years or at 21 years of age?	
17. Again you should consider what would happen to the share of any person named above who has died before you – would you like that share to go to that person's children, again considering if you would you like them to inherit at 18 years or 21 years, or would you prefer that share to lapse and go to the others in the 'class'? *(Most people choose 21 years as the Executors have power to advance monies for education before they reach 21 years – if they take at 18 years the fact they have money could very well affect any educational grant applications if the child is going into higher education)*	
18. You should also consider the **disaster scenario** i.e. where you, your spouse/partner (where relevant) your children, grandchildren or anybody else mentioned in the Will all die at the same time.:	

What would you then like to happen to your estate in these disastrous circumstances? *(You may wish to consider a favoured Charity at this point, or respective siblings, parents, nieces and nephews etc)* Please provide full names and addresses of the disaster legatees together with details of the proportion of your (where relevant joint) estate which you would like such legatees to take. *(Remember that if we are doing Mirror Wills at this point we are dealing with your **joint estate** therefore your Wills must continue to mirror each other i.e. if one wants half to go the Cat's Home and the other wants half to go the Dog's Home then **each** Will must say half to the Cat's Home and half to the Dog's Home)*	

And finally please consider the following

GUARDIANS	YOUR ANSWERS
19. If you have any children under the age of 18 at the time of your death, who would you like to appoint Guardian or Guardians? Please provide full names and addresses. *(This involves the children's day-to-day supervision and residency. You cannot oblige a person to act, so you should check at this stage that they are prepared to do so)*	

FUNERAL WISHES	YOUR ANSWERS
20. Do you have any specific requests as regards to burial, cremation or religious services? *(You may wish to give details regarding ashes, flowers or donations)*	

Please check you have answered all of the relevant questions and are happy with these.

Please print your name/names and sign below (if you require Mirror Wills) before returning this to me in the pre-paid envelope provided or, if the questionnaire was e-mailed to you, please post it back to me using the following Freepost address:

O'Neill Patient
Freepost NWW 5020A
STOCKPORT
SK7 4YA

Sign:…… **Sign:……..……**

Printed Name:……. **Printed Name:…….……..**

Date:…… **Date:……**