

GUARDIAN WILLS & PROBATE

Under the direction and supervision of SIGI HALLIS COHEN LLB Principal Solicitor
Suite 20/87 McLarty Avenue
JOONDALUP WA 6027
B 9300 1708 Fax 9300 1718 Mob 0400 45 1786

WILL INFORMATION SHEET

DATE _____ REFERRAL _____

ID CHECK: Passport Drivers Licence Other: _____

Contemplation of Marriage

Contemplation of Ending of Marriage

SURNAME _____ FIRST/MIDDLE NAMES _____

DOB _____ MARITAL STATUS _____ OCCUPATION _____

SURNAME _____ FIRST/MIDDLE NAMES _____

DOB _____ MARITAL STATUS _____ OCCUPATION _____

ADDRESS _____

CONTACT DETAILS: HOME _____ BUSINESS _____ FAX _____

MOBILE _____ EMAIL _____

WHO DO YOU WISH TO BE YOUR EXECUTOR?

SURNAME _____ FIRST AND MIDDLE NAMES _____

ADDRESS _____ RELATIONSHIP _____

SURNAME _____ FIRST AND MIDDLE NAMES _____

ADDRESS _____ RELATIONSHIP _____

PERSONS TO BENEFIT UNDER THE PROPOSED WILL ARE:-

FULL NAME

ADDRESS

RELATIONSHIP

_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

ARE YOU DIVORCED AND HAS PROPERTY SETTLEMENT BEEN FINALISED.? YES NO

WHO DO YOU WISH TO APPOINT AS GUARDIAN OF YOUR INFANT CHILDREN?

SURNAME _____ FIRST AND MIDDLE NAMES _____

ADDRESS _____ RELATIONSHIP _____

SURNAME _____ FIRST AND MIDDLE NAMES _____

ADDRESS _____ RELATIONSHIP _____

HAS CLIENT OMITTED PERSONS WHO MAY CLAIM UNDER THE INHERITANCE ACT?

YES NO - IF YES, PROVIDE DETAILS

ASSETS

DO YOU HAVE AN INTEREST IN A PARTNERSHIP OR A FAMILY TRUST? YES NO

PLEASE PROVIDE DETAILS

SUPERANNUATION DETAILS

TYPE OF FUND _____

Is there a nominated beneficiary? _____

LIFE INSURANCE DETAILS

COMPANY _____ POLICY NO _____

DIRECTION AND TERMS INCLUDED IN WILL AND MANNER IN WHICH ESTATE IS TO BE DISPOSED;

HAVE YOU ANY SPECIAL BEQUESTS THAT YOU WISH TO MAKE IN YOUR WILL (eg jewellery, motor vehicle)

DO YOU WISH TO INCLUDE THE CLAUSE BELOW – INVESTMENT ADVISOR YES NO
IT IS my wish but I do not direct that my Executor seek professional accounting or financial planning advise in the administration of my estate and any costs incurred shall be deemed a testamentary expense

DO YOU WISH TO INCLUDE THE CLAUSE BELOW – GWP YES NO

WITHOUT imposing any trust or legally binding obligation I suggest that my Executor consult with Guardian Wills & Probate in the administration of my estate

HUSBAND/PARTNER

WIFE/PARTNER

DO YOU WISH TO BE BURIED/CREMATED YES NO

YES NO

SPECIFY ANY SPECIAL ARRANGEMENTS – BURIAL _____

SPECIFY ANY SPECIAL ARRANGEMENTS – CREMATION _____

RELIGIOUS RITES YES NO
INSTRUCTIONS

YES NO

DO YOU WANT AN ENDURING POWER OF ATTORNEY?

YES NO

SURNAME _____ FIRST & MIDDLE NAMES _____

ADDRESS _____ RELATIONSHIP _____

SINGLE _____ JOINT _____ SEVERALLY _____

DO YOU WISH TO NOMINATE A SUBSTITUTE ATTORNEY?

YES NO

SURNAME _____ FIRST & MIDDLE NAMES _____

ADDRESS _____ RELATIONSHIP _____

WHEN DO YOU WISH THE ENDURING POWER OF ATTORNEY TO OPERATE? (From now or Order of The State Administrative Board)

LIVING WILL ADVANCED HEALTH CARE DIRECTIVE ENDURING POWER OF GUARDIANSHIP

I STATE THAT

- (i) the instructions written on this information sheet have been given with my full knowledge, approval, and understanding and that no person has exercised any undue influence over me in regard to the making of my Will or Enduring Power of Attorney.
- (ii) the details, including ownership of the assets listed above, are to the best of my knowledge true and correct and I do not wish any further enquiries to be made in relation to those assets.
- (iii) I understand that this is a legally prepared document and that I will be charged _____ for this service.
- (iv) Guardian Wills & Probate has not given any specific taxation, accounting or financial planning advice in this matter.
- (v) **All Guardian Wills and Probate legal documents are prepared under the direction and supervision of Sigi Hallis Cohen LLB Principal Solicitor**

SIGNED _____

SIGNED _____

DATE _____

DATE _____

NOTES Sigi Hallis Cohen LLB Principal Solicitor