



**BAKERLAW**  
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### **WILL QUESTIONNAIRE**

**The information on this form is confidential and once received by us, it will not be divulged to anyone other than the partners and staff of BakerLaw LLP involved with the preparation of Wills.**

**The questionnaire is designed to help you consider some of the points you should think about in connection with your Will.**

**It will greatly assist us in preparing your Will if you answer all questions in full.**

<b>YOUR DETAILS</b>
<b>Full Name</b> (including any middle names):
Address:
Home Telephone number:
Mobile Telephone number:
Email:
Occupation:
Date of birth:
<b>Have you already made a Will or codicil?</b> Yes/No If yes, please give date of Will/codicil: <b>Please provide a copy of your current Will prior to our meeting, or bring a copy with you.</b> This is required as your current Will may affect your options and our advice.
<b>Are you married or in a Civil Partnership?</b> Yes/no <b>Have you been married before?</b> Yes/No If yes, <b>how did the marriage end?</b> <b>If you have been divorced, please provide a copy of your financial Consent Order from that divorce, prior to our meeting or bring a copy with you.</b> This is required as it may affect your options and our advice.

**Have you married or formed a civil partnership since you made your last Will?**

Yes/No

**Are you expecting to get married or enter into a civil partnership in the near future?**

Yes/No

Are you now, or have you ever been financially connected to someone else – for example through marriage, joint ownership of property, or cohabitation? (This could affect your estate and how it is dealt with after your death).

Yes/No

If **yes**, please provide their full name, and address (if available) and brief details of your connection.

**CHILDREN**

Do you have any children? Yes/No

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

**Child One:**

Full Name:

Address:

Age & DOB:

**Child Two:**

Full Name:

Address:

Age & DOB:

**Child Three:**

Full Name:

Address:

Age & DOB:

**Child Four:**

Full Name:

Address:

Age & DOB:

**DOMICILE** – domicile can affect your tax status

Are you domiciled in the UK?

Yes/No

If no, where are you domiciled?

**FUNERAL WISHES OR DISPOSAL OF BODY** – Please select ALL of the following options you have chosen

- ☐ Buried
- ☐ Cremated
- ☐ Woodland or ecological burial
- ☐ Disposal of body for scientific research
- ☐ Disposal of body for transplants or corneal grafting

Please give any other instructions:

**EXECUTORS** – these are the people responsible for arranging your funeral and distributing your estate

**Executor One:**

Full Name:

Address:

Relationship to you:

**Executor Two:**

Full Name:

Address:

Relationship to you:

**If the above are unable or unwilling to act who should replace them as executors?**

**Substitute Executor One:**

Full Name:

Address:

Relationship to you:

**Substitute Executor Two:**

Full Name:

Address:

Relationship to you:

**TRUSTEES – these are the people responsible for managing any trusts that arise in your will and holding funds for children until they reach 18 or another specified age (it is advisable to have at least two trustees and to include a trustee who will remain impartial) – the Executors can also be Trustees**

**Trustee One:**

Full Name:

Address:

Relationship to you:

**Trustee Two:**

Full Name:

Address:

Relationship to you:

**GUARDIANS** – who would you like to act as the guardian(s) for any children under 18 years should both you and the other parent die? (You should discuss this with the other parent and proposed guardian)

Full Name:

Address:

Relationship to you:

**PERSONAL POSSESSIONS** - it is possible to set out in your will specific gifts of personal items or you can ask your executor to deal with them in accordance with a separate letter of wishes (and if they are not gifted either way they will form part of your 'Residuary Estate')

**Do you wish to give all your personal possessions to your Executors, for them to distribute in line with any written note of wishes that you leave?**

Yes/No

**If no, do you wish to gift ALL your personal possessions to the same person/people?**

Yes/No

If **yes**, to whom (please include names, addresses and their relationship to you):

If no, are there specific personal possessions you wish to be gifted in your Will? Please provide details:

Who should pay for the cost of packing, shipping and insurance, if relevant? Please select one of the following:

- ☐ Your estate
- ☐ The person receiving the gift

**PROVISION FOR YOUR PETS** – do you want to make provision for what will happen to a pet after you have died? Please select one of the following options:

- ☐ Give pet to animal charity together with donation for its upkeep
- ☐ Give pet to a friend or a member of your family with a gift to cover its upkeep
  - Please provide the amount of the cash gift to be made. If you do not wish to include a cash gift please enter £0. Please also provide the name and address of the friend that you wish to take your pets:
- ☐ Instruct executors to euthanise the pet (this option may not be available, as many vets will refuse to euthanise a healthy pet)
- ☐ Other:

**CASH GIFTS** – do you want to make any cash gifts? – Please notify us if you have given any gifts during your lifetime.

Full Name:

Address:

Relationship to you:

Amount:

Substitute to children if person dies before you?

Yes/No

Full Name:

Address:

Relationship to you:

Amount:

Substitute to children if person dies before you?

Yes/No

**GIFTS TO CHARITY** – your beneficiaries may be able to claim a 4% reduction in inheritance tax if you give 10% or more of your estate to charity. We can discuss this in more detail when we meet if this is of interest to you.

Name of charity:

Charity registration number:

Address:

Amount (£ or %):

**GIFT OF LAND AND BUILDINGS** – it is possible to gift your property, or your share of a property, as a specific gift. If you wish your property to pass to the people inheriting the rest of your estate, then leave this section blank.

Details of property:

Your share of the property (%):

Full Name of beneficiary:

Address:

Relationship to you:

If the property is mortgaged or has any charges registered against it do you want the beneficiary to pay off the debts or should it be paid from the estate?

- ☐ Beneficiary
- ☐ Estate

Do you want the beneficiary to pay any inheritance tax on the gift or should the tax be paid from your estate?

- ☐ Beneficiary
- ☐ Estate

**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 what is left?

We can discuss your specific requirements at the meeting to determine the most efficient way of gifting your estate.

Full Name:

Address:

Relationship to you:

Age to receive gift: 18/21/25

Specify percentage to receive (%):

Gift to be given:

- ☐ Outright; or
- ☐ On trust

Substitute to children if person dies before you?

Yes/No

Full Name:

Address:

Relationship to you:

Age to receive gift: 18/21/25

Specify percentage to receive (%):

Gift to be given:

- ☐ Outright; or
- ☐ On trust

Substitute to children if person dies before you?

Yes/No

**If you wish to pass your estate to more than two people, please include details of the other beneficiaries in the space provided on page 10, below.**



**FINAL GIFT OF RESIDUARY ESTATE** – if all the above beneficiaries die before you, who would you like your estate to pass to? This gift is often made to charity, or 50% to one side of the family and 50% to the other

Full Name:

Address:

Relationship to you:

Age to receive gift: 18/21/25

Specify percentage to receive (%):

Gift to be given:

- ☐ Outright; or  
☐ On trust

Substitute to children if person dies before you?

Yes/No

Full Name:

Address:

Relationship to you:

Age to receive gift: 18/21/25

Specify percentage to receive (%):

Gift to be given:

- ☐ Outright; or  
☐ On trust

Substitute to children if person dies before you?

Yes/No

**ASSET PROTECTION** – are any of your beneficiaries likely to become divorced or bankrupt in the near future? There are steps you can take to protect their inheritance.

Yes/No

If yes, we can discuss your options when we meet.

**CHILDREN FROM A PREVIOUS RELATIONSHIP** – do you want to ensure that any children from a previous relationship are provided for when you die?

Yes/No

If yes, we can discuss your options when we meet.

**LASTING POWER OF ATTORNEY OR ENDURING POWER OF ATTORNEY** - have you made an Enduring Power of Attorney or registered a Lasting Power of Attorney? If so, depending on what is included in the document, your will may be affected.

Yes/No

**Please provide details of anything else you think we ought to know:**

### ***FINANCIAL CHECKLIST***

*(to nearest £'000)*

Please provide estimated valuations for each asset – it will enable us to advise you correctly in relation to inheritance tax and decide if you require tailored tax advice.

<b><u>ASSETS</u></b>	<b>Details</b>	<b>Value</b>
Main Residence  Address  Is property jointly owned?  In order to advise you appropriately, we will obtain an up-to-date copy of the title for properties listed from the Land Registry. There will be a disbursement of £3.60 (£3 + VAT) per title.	Yes/No	
Other property(ies)  Address(es)		
Household contents		
Bank/building society accounts		
Investments		
Pension scheme death benefits/Death in service benefits		

Foreign assets		
Agricultural property		
Business property/interest		
Property held in trust under which you are a beneficiary		
Property held on trust which you have a general/specific power of appointment		
<b>TOTAL</b>		

<b><u>LIABILITIES</u></b>	<b>Details</b>	<b>Outstanding amount £</b>
Mortgages		
Bank loans		
Overdraft		
Credit card debt		
Other		
<b>TOTAL</b>		

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, Farnham, Surrey, GU9 7PT.