

Instructions for making a Will

**We need certain basic information in order to draft your Will, which is best provided by completing this form. Please complete as much of the following information as possible.**

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| 1. Your Full Names ( If you do not use the Names on your birth certificate please include these as well) | |
| Forenames: Surname: Address: | |
| Postcode: Telephone Number: Dates of Birth: Email: | |
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| 2. Current Relationship details and status e.g. Married, Civil Partnership, Single, Cohabiting | |
| Forenames: Surname (if different):  Date of Birth: Occupation:  Nature of Relationship:  Details of Previous Relationship: | |
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| 3. If you are not married but plan to marry in the near future, please provide details. Marriage revokes any will, unless the will has been made in contemplation of the marriage. |
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| 4. Do you maintain or give financial help to anyone not to be mentioned in your Will? | |
| Yes ❏ No ❏  If yes, please provide the Name of the person(s) concerned, details of their relationship to you and a brief description of how you maintain or help them financially below: | |
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| 5. Have you made any gifts of more than £3,000 in the last seven years? | |
| Yes ❏ No ❏  If yes, please provide the Name of the person(s) who received the gift, the value of the gift and the date upon which the gift was made below: | |
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| 6. Executors | |
| Who will be responsible for administering your estate and giving effect to the provisions of your Will? | |
| 1. Name and address: | |
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| 2. Name and address: | |
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| 3. Name and address: | |
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| 4. Name and address: | |
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| Do you wish the Partners of AWB Charlesworth to be Executors? Yes ❏ No ❏ | |

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| 7. Your Children | | | | |
| 1. Name: |  | | Date of Birth: |  |
| 2. Name: |  | | Date of Birth: |  |
| 3. Name: |  | | Date of Birth: |  |
| 4. Name: |  | | Date of Birth: |  |
| 5. Name: |  | | Date of Birth: |  |
| 6. Name: | |  | Date of Birth: |  |
| **Children from previous relationships** | | | | |
| 1. Name: |  | | Date of Birth: |  |
| 2. Name: |  | | Date of Birth: |  |
| 3. Name: |  | | Date of Birth: |  |
| 4. Name: |  | | Date of Birth: |  |
| 5. Name: |  | | Date of Birth: |  |
| 6. Name: |  | | Date of Birth: |  |

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| 8. Guardians | |
| You may appoint people to act as guardians of your children who are under 18 at your death if both of their parents are dead. | |
| 1. Name and address: | |
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| 2. Name and address: | |
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| 9. Funeral |
| You may like to specify in your Will if you wish to be: |
| Buried ❏ Cremated ❏ No preference ❏ |
| Do you wish to be buried or your ashes scattered in a particular location? |

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| 10. Gifts of Articles |
| It is possible to have a clause in your Will which leaves all your personal belongings to your executors with guidance about how they should be dealt with. |
| Do you wish to have such a clause? Yes ❏ No ❏ |

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| 11. Specific Gifts of Cash, Items or Property | | | | |
| List names and addresses of person/s and details | | | | |
| 1. Name: | |  | Details: |  |
| 2. Name: | |  | Details: |  |
| 3. Name: ………………………………………………………. Details: ………………………………………………………    If any persons receiving gifts of items, cash or property, please consider what you would want to happen to these gifts if the recipient dies before you. Details of this can be discussed at a meeting. | | | | |  |
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| 12. The Residue |
| Who do you wish to receive your estate after the payment of your personal debts, funeral expenses and legacies (known as Residue)? Are they to receive this in equal shares or unequally? What are your wishes if any beneficiary dies before you? If children are to inherit, at what age do you wish them to inherit; 18, 21 or 25? |

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| 13. Trusts |
| It is possible to use Trusts to protect your beneficiaries if they are vulnerable. If beneficiaries are disabled, imprudent or are at risk of claims being made against them through bankruptcy or divorce a Trust can be used to protect the inheritance for them. A Trust can also be useful if you are married and you want to make sure that your assets are protected if your surviving spouse has to fund residential care or there is a possibility of them remarrying. If you have any concerns please give brief details of the beneficiary concerned and why you think they may be at risk. |

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| 14. Are you a beneficiary under any existing Trust or Settlement? If so, please provide basic details |
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| 15. Do you have any business interests? If so, please provide basic details of the nature of the business (e.g. partnership, limited company, sole trader) and whether succession plans are in place. |
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| 16. Special Provisions |
| Are there any special provisions you would like to discuss including what you would wish to happen in the event of a calamity and all your beneficiaries fail to survive you? |

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| 17. Assets | | | | |
| To enable us to advise you properly please list below your principal assets. Where assets are in sole or joint names please tick the appropriate column. It would be helpful to have approximate values. If you require additional space, please use the additional space overleaf. | | | | |
| Description | Approximate value | In your name | In your partner’s name | In joint names |
| House |  |  |  |  |
| Mortgage (if any) |  |  |  |  |
| Contents |  |  |  |  |
| Motor Vehicles etc. |  |  |  |  |
| Bank Accounts |  |  |  |  |
| Building Society Accounts |  |  |  |  |
| Loans |  |  |  |  |
| Stocks & Shares |  |  |  |  |
| Savings Certificates |  |  |  |  |
| Premium Bonds |  |  |  |  |
| Interest or expectations under anyone else’s Will or Trust Fund |  |  |  |  |
| Lloyds Interests |  |  |  |  |
| Assets and accounts abroad |  |  |  |  |
| Pension or Death in Service Benefits |  |  |  |  |
| Life Assurances |  |  |  |  |
| Others |  |  |  |  |

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| Lasting Powers of Attorney |
| **Please request details of Lasting Powers of Attorney.** |

This information will be treated in strict confidence. Please return to/contact:

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