

Probate Initial Intake Questionnaire

NAME AND ADDRESSES

Your Name(s): _____

Mailing Address: _____

Telephone Nos.: (Work) _____

(Home) _____

(Cellular) _____

E-mail Address: _____

Your Relation to the Deceased: _____

IDENTITY OF DECEASED

Name of Deceased: _____

Deceased's Date of Birth: _____

Deceased's Date of Death: _____

Deceased's Social Security Number: _____

ESTATE PLAN

Did the Deceased have an existing will(s)? Yes No (If yes, please provide me with a copy)

Did the Deceased have an existing Trust(s)? Yes No (If yes, please provide me with a copy)

FAMILY INFORMATION

Was the Deceased married? Yes No

If yes, what was the name of the Deceased's spouse? _____

Is the Deceased's spouse still living? Yes No

If no, when and where did the Deceased's spouse die? _____

Deceased's Children:

<u>Name</u>	<u>Date of Birth</u>	<u>Biological, adopted or stepchild?</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Have any children received an advance on their inheritance or are any children financially indebted to the Deceased? Yes No

Any deceased children? Yes No

If Yes, Name of Deceased Child: _____

Did this deceased child leave any children? Yes No

Deceased's Grandchildren, if any:

<u>Name</u>	<u>Date of Birth</u>	<u>Parents</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Other Pertinent Family Information or Explanation of Above Items:

PERSONAL REPRESENTATIVE

Does the will or any other communication from the Deceased indicate who should be Personal Representative (“executor”) of the Deceased’s estate? (The Personal Representative is responsible for probating the will, paying debts, collecting the assets, and settling the estate.)

Yes No

If so, who?

SAFE DEPOSIT BOX

Did the Deceased have a safe deposit box? Yes No

If so, where? _____

Does anyone else have access to the box? _____

PROFESSIONALS

Did the Deceased have an attorney? Yes No

If yes to the above, please give name and address:

Did the Deceased have an accountant? Yes No

If yes to the above, please give name and address:

Did the Deceased have a financial planner, investment advisor, or insurance agent? Yes No

If yes to the above, please given name and address:

INFORMATION REGARDING THE DECEASED'S ASSETS

- 1. Estimate net worth of estate: _____
- 2. To the extent possible, collect information and documents regarding the Deceased's accounts held at financial institutions.
- 3. To the extent possible, collect information and documents regarding the Deceased's investments:

- Cash or money account funds, or certificates of deposit with stock broker firms.
- Stocks, bonds, and mutual funds where the broker holds the certificates and sent the Deceased periodic statements showing the account balance.
- Mutual funds where the Deceased dealt directly with the issuing company rather than through a stock broker.
- Stocks and bonds (other than U.S. Savings Bonds) where the Deceased held the certificates in your possession.
- U.S. Savings Bonds
- Treasury bills or other government securities.
- Limited Partnerships.
- Oil and gas royalty or working interests.
- Oil and gas mineral rights in land.
- Other securities (describe) _____

- 4. Retirement plans:

- Individual retirement accounts (IRAs), Keogh, or other individual plans providing tax deferral for deposits and income.
- Employer-provided profit sharing, retirement, or other benefit plans.

- 5. Real Estate:

- Real Property located in the state of: _____
- Other property. How many different parcels of real estate did the Deceased own, other than his/her personal residence? _____
In what state(s) are these parcels located? _____

Was the deceased purchasing any of the above properties on a contract for deed?

- Yes No

If yes, provide details:

6. Complete this section if the Deceased was engaged in business.

Do you own a business, or are you a partner in a business? Yes No
If yes, complete the following:

Business is as a corporation. How many corporations? _____

How many corporations are subchapter S corporations? _____

Business is organized as a partnership. How many partnerships? _____

Business is a sole proprietorship. How many different firms? _____

7. Receivables: If any money is owed to the Deceased, as payments on contracts, where the Deceased sold a business, as payments on obligations secured by real estate, or where the Deceased loaned money to someone and held a note, indicated each type of indebtedness:

Promissory note(s) secured by real estate. Amount(s) owed _____

Installment contract(s) of sale of personal property. Amount(s) owed _____

Unsecured promissory note(s). Amount(s) owed _____

8. Life Insurance Policies: For life insurance policies insuring the Deceased, indicate the name of the insurance company, the face amount of the policy, and the type of policy.

Insurance Company	Face Amount	Type of Policy
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

9. Annuities: Please indicate the name of the annuitant and the type of annuity. Do not list annuities under which no benefits are payable after the death of the annuitant.

Regular annuities payable for guaranteed minimum term or amount:

Tax deferred annuities:

10. Personal property other than automobiles, trucks, boats, and trailers:

- Household furniture and appliances
- Collections, art, antiques, valuable jewelry
- Automobiles
- Boats
- Recreational vehicles
- Motor home
- Business machinery and equipment
- Personal equipment and tools
- Farm or ranch machinery and equipment (other than general tools
- Livestock

Liabilities

(Make a list of known liabilities or debts of deceased.)

