WILL QUESTIONNAIRE

**PERSONAL INFORMATION**

Your full legal name:

The name you commonly use, if different from above:

Your gender (if you wish to indicate):

Home address:

Telephone: (H) (B) (Cell)

Occupation:

Employer information:

Date of birth:

Place of birth:

Citizenship:

Marital status:

Full legal name of spouse:

Date and place of marriage:

Do you have a domestic contract? (If yes, please provide a copy)

Were you previously married?

Full legal name(s) of ex-spouse(s), if applicable. If you have a separation agreement, please provide a copy:

Do you have any spousal or child support obligations? (Yes/No). If yes, please list details below:

Name and phone number of accountant (if applicable):

**FAMILY INFORMATION**

Full legal names of children (if applicable). Where applicable, you may, if you wish, indicate the gender of each family member or beneficiary:

|  |  |  |  |
| --- | --- | --- | --- |
| Name: | Date and Place of Birth: | Mother’s name: | Name of child’s spouse (if applicable: |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
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Please provide details of any relevant personal situations of any child (e.g. any disability or other issues). Please also indicate if you have any other relevant dependants:

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Full legal names of grandchildren (if applicable):

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**\*Please include middle names for all individuals**

**WILL INSTRUCTIONS**

1. Do you currently have any assets outside of Canada (Yes/No)? If so, please indicate in which jurisdiction(s):

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1. Do you have any existing Will(s)? If so, please indicate where such Will(s) are located:

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2. Estate Trustee and contact information (**full legal names & relation to you**, if not previously provided).

Your Estate Trustee will administer your estate and distribute your assets or manage trusts established for your beneficiaries in your Will when you pass away. Please list full legal name(s) of the individual(s) whom you wish to appoint as your Estate Trustees, as well as each such individual’s relationship to you (e.g. spouse, friend, parent, sibling, adult child, accountant, etc.) Please also indicate (province/country) where each named individual resides. If you name any individuals who reside in Canada, we will discuss this item with you.:

Named Estate Trustee:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Alternate(s):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Are all death benefits and any registered accounts (i.e. RRSP, TFSA, etc.) to go to spouse? (Yes/No). Please note that any direct beneficiary designations on such registered
accounts will flow outside of your estate:

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1. Household and personal effects (ie. Clothes, furniture, jewellery, heirlooms, artwork, collections, etc. to go to (circle one):
2. Spouse
3. Surviving children
4. All children (surviving, or deceased children’s respective children, if applicable)
5. Other (please explain): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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If applicable, you may wish to consider whether there are any particular personal effects that should be dealt with specifically in your Will. You may list these specific assets above in item “(4) Other” so that we can indicate that your Estate Trustees are legally bound to distribute such items accordingly. However, should you change your mind or acquire new personal effects with which you would like to dispose, you may have to amend your Will.

It may be preferrable to deal with your personal effects in a memorandum of wishes. This is a document that you could prepare at any time before your death. It does not have to be in any specific legal language because it does not form part of your Will. You will be free to edit this memorandum whenever you wish and see fit, without amending your Will. The drawback of using a memorandum to indicate your wishes is that it is not legally binding on your Estate Trustees.

1. Do you have any specific bequests/gifts (i.e. charitable, personal, etc.)? Please list such recipients and value of such specific bequests below:

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1. Once all of the gifts of specific assets or cash bequests have been distributed and all taxes and debts have been paid, the remaining assets left in your estate is called the “residue”.

If applicable, is your spouse to inherit the residue of your estate? (Yes/No): \_\_\_\_\_\_\_\_\_\_. Please note that if you have a spouse and you do not adequately provide for your spouse in your Will, your surviving spouse may be able to assert a claim against your estate under the *Family Law Act*) If you are not providing adequately for your spouse with regard to *Family Law Act* rules, we will discuss this item with you:

Is a spousal trust to be set up for your spouse? (Yes/No). If you wish to set up a spousal trust, we will discuss this item with you directly:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If you do not have a spouse, who or what (e.g. charitable organizations) will be the beneficiary or beneficiaries of your estate? If you have children, please see below.

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1. If you do not have a spouse or if your spouse predeceases you, are trust funds to be established for your children (if applicable) if they are under age? (Yes/No):

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If so, what are the trust fund details (i.e. hold until youngest reaches certain age, income and capital used for designated purposes, payments and discretion of Trustee(s) etc.)? Please indicate the age(s) of distribution.

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1. If you do not intend to establish trusts for your children, do you wish to distribute your estate between your children? In equal shares? In unequal shares (if so, please briefly indicate your reason).

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1. If your designated beneficiaries fail to survive you, who would be your alternative beneficiaries? And in what proportions?

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1. Are any children or grandchildren born outside of marriage to inherit? (Yes/No):\_\_\_\_\_\_\_
2. Are there any other special instructions you wish to see reflected in your Will?

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1. Guardians of minor child/children: Please list full legal name(s) of the individual(s) whom you wish to appoint as the guardian of your minor child/children, as well as each such individual’s relationship to you (e.g. sibling, friend, parent) and where they reside.

Please note that upon your death, if you leave any minor child/children surviving, the named guardian(s) below would be required to apply to the Court for permanent guardianship within a period of 90 days. The Court will then appoint a legal guardian on the basis of the child/children’s best interests. The Court may rely heavily on the wishes expressed in your Will in order to gain an understanding of what is in the best interests of your child /children.

Guardian(s) of minor child(ren): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Alternative guardians: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**POWERS OF ATTORNEY**

You may authorize a person to act on your behalf with respect to your financial affairs in the event that you are incapacitated or in the event that you are unavailable for any reason. This person is your “Attorney” for property. Your Attorney will be able to do anything that you can do with respect to financial matters. A notable exception is that they cannot rewrite your Will, or create any new Will for you.

Please provide the full legal names and relation to you if not already provided. Please also indicate whether any named individuals do not reside in Canada. If you are naming more than one Attorney, please specify how your Attorneys should act (jointly, or jointly and/or severally indicating they may act separately if and when required, e.g. if one Attorney is unavailable).

1. Power of Attorney for Property:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Alternative Attorney:

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You may also authorize a person to make decisions for you in connection with medical treatment, admission to care facilities, personal care decisions, and end of life decisions. This person is your “Attorney” for personal care. Your Attorney will only be able to make any such decisions for you when it is determined that you are incapable of making these decisions for yourself. Your Attorney must make the decision that you would have made if you were capable. As a result, it is important that your Attorney knows and is familiar with what your decisions and wishes would have been. As such, you should relay any specific instructions that you feel particularly strongly about to your Attorney, or include any such particular wishes in your Power of Attorney for Personal Care.

Please provide the full legal names and relation to you if not already provided. Please also indicate whether any named individuals do not reside in Canada. If you are naming more than one Attorney, please specify how your Attorneys should act (jointly, or jointly and/or severally indicating they may act separately if and when required, e.g. if one Attorney is unavailable).

1. Power of Attorney for Personal Care:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Alternative Attorney:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_