

QUESTIONNAIRE FOR PERSONAL REPRESENTATIVES

PART 1 – DECEASED’S PERSONAL DETAILS

1. Please give deceased’s:

a. Full name – please include any variations he or she used:

b. Address:

c. Occupation:

d. Marital status

(i) If married/in a registered civil partnership:

- please provide the spouse/civil partner’s full name, date of birth, date of marriage and place of marriage

(ii) If widowed:

- please provide the full name, date of birth, date of death, date and place of marriage of deceased’s former spouse/civil partner
- please provide (if available) a copy of the former spouse/civil partner’s death certificate, grant of probate, deed of variation and IHT forms
- did the Deceased’s former spouse/civil partner use their Nil Rate Band?

(iii) If divorced:

- please provide the name of any former spouse/civil partner and dates of separation and divorce – attach copy of decree absolute
- please provide a copy of the decree absolute and any information regarding maintenance of the former spouse/civil partner and/or children of the relationship

(iv) If single

- please provide the full name and date of birth of any person with whom the deceased was cohabiting at the date of death
- please provide full names and dates of birth of any children of the deceased born outside of marriage/civil partnership

2. Date and place of death:

Date and place of birth:

3. National Insurance number:

4. Has the funeral taken place? YES NO
Please provide a copy of the funeral account and any invoices or receipts in respect of the wake (if applicable). Please confirm whether the account has been paid and if so, by whom?

5. Please attach as many spare copy Death Certificates as you hold: (keep receipt to reclaim cost)

PART 2 – ONLY COMPLETE THIS PART IF THERE IS A WILL

1. Where is the Will? Any realistic possibility there were later Wills?

2. If you can, please give full names, addresses, occupations and telephone numbers of all the executors and guardians:

Executors: _____

Guardians: _____

3. Was any letter left by the Deceased with the Will expressing wishes about gifts to be made or the funeral? If so, please let us have it:

4. Do you know if:

a. all the beneficiaries mentioned in the Will are alive?

b. the addresses given in the Will are correct? (If any of the beneficiaries are under 18, please give parents' names and addresses and please supply birth certificates):

5. Are all Executors and Trustees willing and able to act? Renunciation or power reserved?

6. Any other information regarding the Will?

PART 3 – ONLY COMPLETE THIS PART IF THERE IS NO WILL OR NO EXECUTOR(S)

This information will help establish who will be in charge of the Deceased’s property for the time being, and who will inherit it eventually.

- 1. a. If the Deceased was married/in a registered civil partnership at death, please give spouse’s/civil partner’s address and telephone number:

- c. If the Deceased had children, please give their names, addresses and telephone numbers and dates of birth if they are under 18:

- d. Are all children definitely natural born of the deceased, named on birth certificate? Any other children (adopted in or out of family, illegitimate or estranged)?

- e. If the Deceased did not leave a spouse/civil partner or children, what other relatives did he or she leave? Do you have their addresses? Please indicate each person’s relationship to the Deceased:

- f. Please compile a rough family tree. A complete copy will be reproduced to and will need to be signed by all those entitled under the intestacy in due course.

PART 4 – THE DECEASED’S ASSETS

1.
 - a. House: was it solely owned or owned as joint tenants or tenants in common?
(Ensure that property is secure if empty and insurers are informed).

 - b. Was it freehold or leasehold?

 - c. Where are the title deeds?

 - d. Was the deceased a tenant? If so has notice been given to the Landlord? When expires?

2. If known, please estimate the value of the following property left by the deceased (**indicate if the Deceased owned anything jointly with another person**). **Are any of these items subject to a specific gift in the Will or likely to be required by any beneficiary in specie?:**
 - a. House:

(official valuations will be required, usually three)
 - e. Furniture:

 - c. Clothing:

 - f. Jewellery:

 - e. Car, caravan, motorbike, boat (giving make, type and year, if possible), numberplates?:

 - g. Personal possessions (e.g. camera, hobby, equipment, collections, books, records, etc.):

3. a. Is there adequate insurance cover for the Deceased's assets?

- b. Please say which valuables have been removed and to where:

- c. Have the insurers been notified of the death? Any restriction on policy / visits required?

4. Stocks and shares:
- a. Please list these holdings and say where the certificates are:

- b. Are the shares in the Deceased's name or otherwise?

5. Please give name and address of stockbrokers/financial advisors:

6. Have you found any uncashed cheques (for share dividends, for example) or other indications of money owed to the Deceased? Please let us have these.

7. Building Society accounts (please give address of society and account numbers and send us the passbooks / bond certificates and notify us if any of the accounts are online only):

8. Bank accounts (please give address of bank, and account numbers and notify us if any accounts are online only). In the case of joint accounts, do you know which of the joint holders paid money into the account?

9. a. Premium Bonds (please list Bond numbers or give the Bond holder number):

b. Are Bonds to stay in the draw for the year after death or be encashed?

10. National Savings Certificates, etc. (please list certificates or numbers):

11. National Savings Bank (please give the book or account number). Did the Deceased nominate the account in favour of anybody?

12. Deceased's cash – did you find any money in his or her wallet or purse?

13. a. Did the Deceased have any life insurance? If so, please give the policy numbers and say where the policies are:

b. Were they written in trust?

c. Did the Deceased pay any premium on any assurance policy apart from any referred to above within 14 years of death?

14. Pensions (are they from an employment, from a spouse's scheme, or a state retirement pension: please give scheme trustees' address and Deceased's reference number, and the Deceased's pension number). Please also send us the pension books, etc.:

15. If applicable, has a widow's/widower's pension been applied for? Sole occupancy discount for Council Tax?

16. Please give details of any salary due to the Deceased, or any fees not yet paid, e.g., Director's fees:

17. Did the Deceased have a business? Was the Deceased a Director of a company?

18. Did the Deceased own a farm and/or agricultural land?

19. Did the Deceased own any property which was rented out?

20. Did the Deceased have any property in a safe deposit box at the bank?

21. Was the Deceased at the time of death entitled to a life interest, annuity or other interest in possession in settled property or a trust?

22. Did the Deceased own any property (such as a holiday cottage or family home) abroad? Please say what he or she owned and where it is:

23. Was the Deceased in receipt of social security benefits? E.g. OAP, AA, Disability Living Allowance:

24. Did the Deceased have any borrowed or rented equipment that needs to be returned?

25. Was the Deceased the joint owner of any property not mentioned above?

26. **DIGITAL ASSETS**

a. Did the Deceased own any hardware or software of particular value?

b. Did the Deceased own a website/blog/other online interest?

c. Did the Deceased own any other digital assets of any value, e.g., domain names, games characters, etc.?

c. Did the Deceased have an account with Betfred or similar gambling account?

PART 5 – DEBTS AND LIABILITIES

1. a. Please send us all bills that appear not to have been paid. The following list may be of assistance: credit cards or store cards, electricity, gas, water, telephone, mortgage, overdraft or loan account, community charge/council tax, rent , service charge (if the Deceased lived in a flat). Have mobile telephone, television and broadband been cancelled? Water rates? (has furniture been removed?)

b. In addition, if the Deceased had a business, there may well be outstanding debts. Do you know of these?

2. Do you know if the Deceased guaranteed any loans?

3. If the Deceased had an accountant or other adviser dealing with his or her tax, please give his or her name, address and telephone number. Or provide UTI reference:

4. Any medical bills, home help or care home fees outstanding?:

PART 6 – GENERAL

1. To establish the extent of inheritance tax payments due to be made, please give details and dates of all gifts (including money, objects or land) or releases from settlements, made by the deceased within 14 years of his or her death together with details of the name, address and relationship of the donee to the donor:

2. Do you know of any family trusts or settlements from which the Deceased benefited or was involved as a trustee?

3. Was anybody supported and maintained by the Deceased at the time of his or her death, e.g. children and/or a former spouse or partner? Any possibility known of Inheritance (Provision for Family and Dependents) Act claims?

4. Did the Deceased inherit any money within five years of death?

5. Had the Deceased executed an Enduring Power of Attorney / Lasting Power of Attorney? If registered please provide original and all certified copies.

6. Do you have access to the Deceased's :

- e-mail accounts and websites
- online banking/subscriptions
- digital storage, e.g., photos, documents, etc.
- social networking profiles

7. Any other points that you think would be of assistance (for example, please give the name, address and telephone number of any other professional adviser, such as an insurance broker, used by the deceased):

PLEASE REMEMBER that you should check the insurance position of the Deceased's car before using it:

8. Are funds likely to be available to pay any IHT bill (must be paid before Grant is issued – certain banks will provide direct payment of liquid assets for this purpose)

PART 7

Please add any other information you think we should have here:
