

WITTS MOLONEY FORM OF AUTHORITY- WILL2008

Office use only	Client Name:	Reference:
1. Personal Details	You	Spouse / Civil Partner / Partner (please indicate which)
Full Name		
Address		
Postcode		
Telephone numbers:		
Daytime		
Home		
Mobile		
Occupation		
Date of birth		
Place of birth		
Maiden or former name(s)		
Nationality		
Former nationality (if any)		
Tax residence (if known)		
Location of previous will		
Marital status	Single/Divorced/Engaged/Remarried Married/Widowed/Separated	Single/Divorced/Engaged/Remarried Married/Widowed/Separated
It is our policy to use email so if you do not use the email address regularly or do not wish us to use this as a matter of course Please specify or do not fill in: _____@_____		
How did you hear about us?		
2. Matter Description Will		

(a) Children

Full name	Address	Date of birth	Status*

(a) whether the child is from the present relationship or a previous relationship; (b) in the case of a couple completion this questionnaire, which is the parent; (c) whether the child is natural or adopted
(d) whether the child is legitimate.

(b) Grandchildren

Full Name	Address	Date of birth	Name of parent

(c) Disposal of your body:

- a. Type of funeral: burial/ cremation.
- b. Any specific funeral wishes:
- c. Do you carry a donor card?
- d. Are you leaving your body for medical purposes?

(d) Executors:

Full name	Address	Sole/joint/substitutional*
Solicitor (please tick)		

(f) Guardians:

Full name	Address	Sole/joint/substitutional*

*In the "Sole/joint/substitutional" columns of (5) and (6), please indicate "sole" whether the person is the only executor/guardian, "joint" if they are to act together, and "substitutional" if the person only takes office on the death/incapacity of the other(s).

(g) Specific Gifts

Thing given	Beneficiary	Address
"Chattels" to be mentioned on a separate list*	...to divide them for you	

*Tick this last item if you want a "precatory trust": an arrangement whereby one person receives your chattels (a legal term meaning, broadly, the contents of your house and garage, usually including the car) and is asked (but is NOT obliged) to divide them in accordance with your wishes.

(h) Cash Gifts

Amount (£)	Beneficiary	Address

(i) Residue

Please choose one of the following:

- a. All to my spouse/civil partner/partner, failing which all to my children equally (at age 18/21/25/other) failing which, substituting their children equally (at age 18/21/25/other).
- b. All to my children equally (at age 18/21/25/other) failing which, substituting their children equally (at age 18/21/25/other).
- c. Shared between the following:

Fraction or percentage	Beneficiary	Address
Column must total 1, or 100%		

- d. Other (please explain below)

In consultation with your adviser, note any tax-planning adaptations to the above provisions, here:

(j) Assets

Insert the values of the following, broken down by ownership.

Asset	Self (£)	Spouse/Civil Partner/Partner (£)	Joint (£)	Totals
Main residence				
Mortgage on above (-)				
Life cover or endowment policy attached to mortgage above				
Farmland				
Land used in a business				
Other land or buildings				
Mortgages on any of above (-)				
Life cover or endowment policy attached to mortgages above				
Own/family business (or shares, if a company)				
Bank and building society accounts, and national savings				
Stocks, shares and unit trusts				
Life policies (indicate whether written in trust)				
Pension schemes not yet in payment (indicate type, if known)				
Other savings or investments				
Chattels (including vehicles, jewellery and antiques)				
Major debts, or other liabilities (-)				
Life cover attached to liabilities above				
Overseas assets				
Expectations of inheritance				
Trusts from which you do/could benefit				
Trusts settled by you (please give details)				
Gifts made by you (please give dates)				
Other				
Totals				

3. All Matters: File storage after completion Please note we have no paper storage facilities

We authorise you to destroy our file(s) 4 weeks after completion and to retain an electronic record	YES	NO
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Please note We will have scanned in your complete file and will have immediate access to anything you may require in future. Any original documents we consider that you will require will be returned to you at no additional cost. If however you do not elect for us to destroy the file or you require the paper copy for any reason we will send the file to you by recorded delivery for the fee of £58.75 which will be included in your completion statement.

I/We hereby appoint Witts Moloney solicitors to act on my/our behalf in the above matter(s).

I/We accept the terms and conditions of engagement notified to us and as listed in your terms delivered to us and hereby acknowledged.

Signature	Name	Date