



**ESTATE PLANNING QUESTIONNAIRE  
PERSONAL INFORMATION**

Grantor #1 \_\_\_\_\_ DOB \_\_\_/\_\_\_/\_\_\_\_\_ U.S Citizen Y N

Grantor #2 \_\_\_\_\_ DOB \_\_\_/\_\_\_/\_\_\_\_\_ U.S Citizen Y N

Address \_\_\_\_\_ E-Mail: \_\_\_\_\_

City/State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell (#1) \_\_\_\_\_ Cell (#2) \_\_\_\_\_

Referred by: \_\_\_\_\_

Grantor #1 Employer \_\_\_\_\_ Position \_\_\_\_\_

Employer plans: Pension: Yes No 401(k): Yes No Profit Sharing: Yes No

Grantor #2 Employer \_\_\_\_\_ Position \_\_\_\_\_

Employer plans: Pension: Yes No 401(k): Yes No Profit Sharing: Yes No

<b>Do you have:</b>	<b>Grantor #1</b>		<b>Grantor #2</b>	
Will	Yes	No	Yes	No
Trust	Yes	No	Yes	No
Power of Attorney	Yes	No	Yes	No
Terminal Illness Declaration	Yes	No	Yes	No
Safe Deposit Box	Yes	No	Yes	No
Cemetery Plots	Yes	No	Yes	No
Prepaid Burial Plans	Yes	No	Yes	No
Financial Planner	Yes	No	Yes	No
Accountant	Yes	No	Yes	No
Insurance Agent	Yes	No	Yes	No
Disability Insurance	Yes	No	Yes	No
Nursing Home Insurance	Yes	No	Yes	No

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**FAMILY INFORMATION**

Name	DOB	Child from current or prior relationship?
<b>Children:</b>		
_____	/ /	_____
_____	/ /	_____
_____	/ /	_____
_____	/ /	_____
_____	/ /	_____

<b>Grandchildren:</b>		
_____	/ /	_____
_____	/ /	_____
_____	/ /	_____
_____	/ /	_____
_____	/ /	_____
_____	/ /	_____

If any of your children are under 18 years of age, who would you like to have raise them (a first choice and an alternative)?

\_\_\_\_\_ then (if applicable) \_\_\_\_\_

Do any of your children have special needs?

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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**FINANCIAL INFORMATION - ASSETS**

**Real Estate:**

Residence: Address \_\_\_\_\_  
\_\_\_\_\_

Declaration of Homestead filed? \_\_\_\_\_

Other real estate: Address \_\_\_\_\_  
\_\_\_\_\_  
Address \_\_\_\_\_  
\_\_\_\_\_

**Personal Property:**

Checking Account(s) Bank \_\_\_\_\_  
Account # \_\_\_\_\_  
Held in Joint Tenancy? Yes or No? \_\_\_\_\_  
Beneficiary? \_\_\_\_\_

Bank \_\_\_\_\_  
Account # \_\_\_\_\_  
Held in Joint Tenancy? Yes or No? \_\_\_\_\_  
Beneficiary? \_\_\_\_\_

Bank \_\_\_\_\_  
Account # \_\_\_\_\_  
Held in Joint Tenancy? Yes No? \_\_\_\_\_  
Beneficiary? \_\_\_\_\_

Savings Account(s) Bank \_\_\_\_\_  
Account # \_\_\_\_\_  
Held in Joint Tenancy? Yes No? \_\_\_\_\_  
Beneficiary? \_\_\_\_\_

Bank \_\_\_\_\_  
Account # \_\_\_\_\_  
Held in Joint Tenancy? Yes or No? \_\_\_\_  
Beneficiary? \_\_\_\_\_

Bank \_\_\_\_\_  
Account # \_\_\_\_\_  
Held in Joint Tenancy? Yes or No? \_\_\_\_  
Beneficiary? \_\_\_\_\_

Money Market

Bank \_\_\_\_\_  
Account # \_\_\_\_\_  
Held in Joint Tenancy? Yes or No? \_\_\_\_  
Beneficiary? \_\_\_\_\_

Stock Market Accounts

Broker \_\_\_\_\_  
Account # \_\_\_\_\_  
Held in Joint Tenancy? Yes or No? \_\_\_\_  
Beneficiary? \_\_\_\_\_

Mutual Fund Accounts

Company \_\_\_\_\_  
Account # \_\_\_\_\_  
Held in Joint Tenancy? Yes or No? \_\_\_\_  
Beneficiary? \_\_\_\_\_

IRA – Grantor #1

Company \_\_\_\_\_  
Account # \_\_\_\_\_  
Beneficiary? \_\_\_\_\_

IRA – Grantor #2

Company \_\_\_\_\_  
Account # \_\_\_\_\_  
Beneficiary? \_\_\_\_\_

Annuities

Company \_\_\_\_\_  
Account # \_\_\_\_\_  
Beneficiary? \_\_\_\_\_

Timeshares                      Company \_\_\_\_\_  
   Account # \_\_\_\_\_  
   Beneficiary? \_\_\_\_\_

Cryptocurrency                      Company \_\_\_\_\_  
   Account # \_\_\_\_\_  
   Beneficiary? \_\_\_\_\_

Life Insurance  
(Grantor #1)                      Company \_\_\_\_\_  
   Policy # \_\_\_\_\_  
   Beneficiary? \_\_\_\_\_

Company \_\_\_\_\_  
Policy # \_\_\_\_\_  
Beneficiary? \_\_\_\_\_

Life Insurance  
(Grantor #2)                      Company \_\_\_\_\_  
   Policy # \_\_\_\_\_  
   Beneficiary? \_\_\_\_\_

Company \_\_\_\_\_  
Policy # \_\_\_\_\_  
Beneficiary? \_\_\_\_\_

Vehicles – Grantor #1                      Make \_\_\_\_\_  
   Model \_\_\_\_\_  
   Year \_\_\_\_\_  
   Paid Off      Yes or No? \_\_\_\_\_

Vehicles – Grantor #2                      Make \_\_\_\_\_  
   Model \_\_\_\_\_  
   Year \_\_\_\_\_  
   Paid Off      Yes or No? \_\_\_\_\_

“Toys” (e.g. boats, trailers, ATVs, motorcycles, etc.)  
\_\_\_\_\_  
\_\_\_\_\_

Business Interests

Name of Company

% Interest in Company

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

**ESTATE PLANNING**

**WE WILL NEED THE FOLLOWING INFORMATION TO PREPARE YOUR ESTATE PLANNING DOCUMENTS:**

**Wills and or Trust (if applicable)**

Executor - This is the person responsible for probating your estate, if necessary. Please list your first choice and an alternate.

Grantor #1 \_\_\_\_\_ then \_\_\_\_\_

Grantor #2 \_\_\_\_\_ then \_\_\_\_\_

Trust Name (if applicable) \_\_\_\_\_

On the death of the first of you, would you like the survivor to be able to make any changes he/she would like? **Yes or No?** \_\_\_\_\_

Successor Trustee (if applicable) – This is the person responsible for gathering, managing, and distributing you trust when you are gone or incapacitated.

\_\_\_\_\_ then \_\_\_\_\_

Who gets your estate when both of you are gone? Please provide names & dates of birth for each beneficiary \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

How much for each person/entity/animal? (It is best to think in terms of percentages)

\_\_\_\_\_

At what age(s) do they receive it (e.g., half at 25 and the remainder at 30)?

\_\_\_\_\_

Are there any other specifications that relate to distributions?

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Do you intend to gift any specific items of personal property (e.g., jewelry, guns, art, coin collections, etc.) or other asset to someone specifically? If so, please list the item and the full name of who it should be given to:

\_\_\_\_\_ goes to \_\_\_\_\_  
\_\_\_\_\_ goes to \_\_\_\_\_  
\_\_\_\_\_ goes to \_\_\_\_\_

**Disposition Instructions**

**Grantor # 1**

Do you wish to be **buried** or **cremated** or **something else**? \_\_\_\_\_

If *something else*, please explain: \_\_\_\_\_

Do you wish to make an anatomical gift upon your death? **Yes** or **No**? \_\_\_\_\_

Who do you wish to name as an alternate designee to ensure your instructions are carried out if your partner is unable to? \_\_\_\_\_

Do you have any special wishes/ instructions? \_\_\_\_\_

**Grantor #2**

Do you wish to be **buried** or **cremated** or **something else**? \_\_\_\_\_

If *something else*, please explain: \_\_\_\_\_

Do you wish to make an anatomical gift upon your death? **Yes** or **No**? \_\_\_\_\_

Who do you wish to name as an alternate designee to ensure your instructions are carried out if your partner is unable to? \_\_\_\_\_

Do you have any special wishes/ instructions? \_\_\_\_\_

**Healthcare Power of Attorney (Living Will)**

Who would you like to make healthcare decisions for you if both you and your partner cannot act (i.e. within the provision of your wishes as stated in the document)?

Grantor #1 \_\_\_\_\_  
Address \_\_\_\_\_ then, \_\_\_\_\_  
Phone \_\_\_\_\_

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Grantor #2 \_\_\_\_\_  
 Address \_\_\_\_\_ then, \_\_\_\_\_  
 Phone \_\_\_\_\_

**Financial Power of Attorney**

Who would you like to make financial decisions for you if both of you cannot act?

Grantor #1 \_\_\_\_\_  
 Address \_\_\_\_\_ then, \_\_\_\_\_  
 Phone \_\_\_\_\_

Grantor #2 \_\_\_\_\_  
 Address \_\_\_\_\_ then, \_\_\_\_\_  
 Phone \_\_\_\_\_

**WHAT YOU SHOULD BRING WITH YOU:**

- Existing Estate Planning Documents (Wills, Trust, etc.)
- Deeds or Title Policies for Real Estate
- Bank Statements
- Retirement Account/Pension Statements and Information
- Life Insurance Policy Statements
- Vehicle Titles

**WHAT WE CAN DO FOR YOU**

**WE WILL MEET WITH BOTH OF YOU FOR AN INITIAL CONSULTATION.**

**WE CAN PREPARE THE FOLLOWING DOCUMENTS SPECIFICALLY TAILORED TO MEET YOUR ESTATE PLANNING NEEDS:**

- |                               |   |
|-------------------------------|---|
| Revocable Trust               | Disposition Instructions                                |
| Certificate of Trust          | Guardianship Nomination                                 |
| Pour-Over Wills               | Homestead Declaration (including recordation)           |
| Personal Property Lists       | Quitclaim Deeds for Real Estate (including recordation) |
| Terminal Illness Declarations | Assignment of Personal Property                         |
| Medical Power of Attorney     | Assignment of Business Interests                        |
| Financial Power of Attorney   |   |

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