

# Will Instruction Kit



Peninsula Taxation And Business Centre

*Making business a pleasure*

For:

## CLIENT DETAILS

Name: \_\_\_\_\_

Phone: \_\_\_\_\_

Mobile: \_\_\_\_\_

Email: \_\_\_\_\_

## ADVISOR DETAILS (if Applicable)

Name: \_\_\_\_\_

Phone: \_\_\_\_\_

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

\_\_\_\_\_

*“Do not judge my future destination by my present location.”*

Peninsula Taxation And Business Centre

## INTRODUCTION

The purpose of this form is to provide the necessary information and detail about your financial affairs so that after consideration of the content and personal discussion with Peninsula Business and Taxation Centre, arrangements may be made by the centre to have a Will drawn on your behalf(s) or this information can be given to the solicitor of your choice.

Whilst there are many factors to consider in drafting a Will to meet your needs, you should carefully consider the following three items and depending on your circumstances, your Advisor should raise a number of other matters for discussion at your initial interview.

## PLANNING

Planning your Will to give effect to your wishes, involves a careful study of your own particular circumstances.

You should initially consider:

1. What in the way of assets do I have now and potentially in the future to dispose of under my Will?
2. Who do I wish to leave those assets to (my beneficiaries)?
3. Who do I want to have as my Executor to undertake the administration of my Estate and have the task of handing over my assets to my beneficiaries?

After giving thought to the above three considerations, the following questions and requested information about you, your family and your assets, will assist you to put together the necessary detail to enable preparation of your Will.

# Client Details



## CLIENT 1

Family Name: \_\_\_\_\_  
Given Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
Suburb: \_\_\_\_\_  
State: \_\_\_\_\_ P/Code: \_\_\_\_\_  
Phone (h): \_\_\_\_\_  
Phone (w): \_\_\_\_\_  
Phone (m): \_\_\_\_\_  
Email: \_\_\_\_\_  
Date of Birth: \_\_\_\_\_  
Occupation: \_\_\_\_\_

## CLIENT 2

Family Name: \_\_\_\_\_  
Given Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
Suburb: \_\_\_\_\_  
State: \_\_\_\_\_ P/Code: \_\_\_\_\_  
Phone (h): \_\_\_\_\_  
Phone (w): \_\_\_\_\_  
Phone (m): \_\_\_\_\_  
Email: \_\_\_\_\_  
Date of Birth: \_\_\_\_\_  
Occupation: \_\_\_\_\_

Marital Status:  
 Single  Widow  Engaged  Widower  Married  Separated  Defacto  Divorced

## CHILDREN (if applicable)

Full Name	Date of Birth
1) _____	_____
2) _____	_____
3) _____	_____
4) _____	_____
5) _____	_____
6) _____	_____
7) _____	_____

# Executors

## EXECUTORS

Tick all that applies:

Sole Executor     Co-Executor     Alternate Executor and/or Trustee

## SOLE EXECUTOR

Family Name: \_\_\_\_\_ Given Name: \_\_\_\_\_

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

Suburb: \_\_\_\_\_ State: \_\_\_\_\_ P/Code: \_\_\_\_\_

Phone (h): \_\_\_\_\_ Phone (w): \_\_\_\_\_

Phone (m): \_\_\_\_\_ Email: \_\_\_\_\_

Relationship: \_\_\_\_\_

## CO-EXECUTORS

Family Name: \_\_\_\_\_ Given Name: \_\_\_\_\_

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

Suburb: \_\_\_\_\_ State: \_\_\_\_\_ P/Code: \_\_\_\_\_

Phone (h): \_\_\_\_\_ Phone (w): \_\_\_\_\_

Phone (m): \_\_\_\_\_ Email: \_\_\_\_\_

Relationship: \_\_\_\_\_

## ALTERNATE EXECUTOR AND/OR TRUSTEE

Family Name: \_\_\_\_\_ Given Name: \_\_\_\_\_

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

Suburb: \_\_\_\_\_ State: \_\_\_\_\_ P/Code: \_\_\_\_\_

Phone (h): \_\_\_\_\_ Phone (w): \_\_\_\_\_

Phone (m): \_\_\_\_\_ Email: \_\_\_\_\_

Relationship: \_\_\_\_\_

NB: Should you have more information and require more space, please include on a separate piece of paper.

# Pecuniary Legacies

## PECUNIARY LEGACIES (gifts of money)

If it is intended to make any specific gifts of money (pecuniary Legacies), real estate (devises), jewellery and special items (special bequests) etc, please provide below, a full description of the intended gifts, as well as the full names and the relationships to you, of the persons receiving them.

1. Family Name: \_\_\_\_\_ Given Name: \_\_\_\_\_

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

Relationship: \_\_\_\_\_ Amount: \_\_\_\_\_

2. Family Name: \_\_\_\_\_ Given Name: \_\_\_\_\_

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

Relationship: \_\_\_\_\_ Amount: \_\_\_\_\_

3. Family Name: \_\_\_\_\_ Given Name: \_\_\_\_\_

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

Relationship: \_\_\_\_\_ Amount: \_\_\_\_\_

4. Family Name: \_\_\_\_\_ Given Name: \_\_\_\_\_

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

Relationship: \_\_\_\_\_ Amount: \_\_\_\_\_

5. Family Name: \_\_\_\_\_ Given Name: \_\_\_\_\_

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

Relationship: \_\_\_\_\_ Amount: \_\_\_\_\_

6. Family Name: \_\_\_\_\_ Given Name: \_\_\_\_\_

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

Relationship: \_\_\_\_\_ Amount: \_\_\_\_\_

NB: Should you have more information and require more space, please include on a separate piece of paper.

## DEVICES (gifts of real estate)

1. Family Name: \_\_\_\_\_ Given Name: \_\_\_\_\_

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

Relationship: \_\_\_\_\_

Property Address: \_\_\_\_\_

Title Particulars: \_\_\_\_\_ Amount: \_\_\_\_\_

2. Family Name: \_\_\_\_\_ Given Name: \_\_\_\_\_

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

Relationship: \_\_\_\_\_

Property Address: \_\_\_\_\_

Title Particulars: \_\_\_\_\_ Amount: \_\_\_\_\_

3. Family Name: \_\_\_\_\_ Given Name: \_\_\_\_\_

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

Relationship: \_\_\_\_\_

Property Address: \_\_\_\_\_

Title Particulars: \_\_\_\_\_ Amount: \_\_\_\_\_

4. Family Name: \_\_\_\_\_ Given Name: \_\_\_\_\_

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

Relationship: \_\_\_\_\_

Property Address: \_\_\_\_\_

Title Particulars: \_\_\_\_\_ Amount: \_\_\_\_\_

NB: Should you have more information and require more space, please include on a separate piece of paper.

# Special Bequests

## SPECIAL BEQUESTS (specific items)

1. Family Name: \_\_\_\_\_ Given Name: \_\_\_\_\_

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

Relationship: \_\_\_\_\_

Items: \_\_\_\_\_

2. Family Name: \_\_\_\_\_ Given Name: \_\_\_\_\_

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

Relationship: \_\_\_\_\_

Items: \_\_\_\_\_

3. Family Name: \_\_\_\_\_ Given Name: \_\_\_\_\_

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

Relationship: \_\_\_\_\_

Items: \_\_\_\_\_

4. Family Name: \_\_\_\_\_ Given Name: \_\_\_\_\_

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

Relationship: \_\_\_\_\_

Items: \_\_\_\_\_

5. Family Name: \_\_\_\_\_ Given Name: \_\_\_\_\_

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

Relationship: \_\_\_\_\_

Items: \_\_\_\_\_

6. Family Name: \_\_\_\_\_ Given Name: \_\_\_\_\_

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

Relationship: \_\_\_\_\_

Items: \_\_\_\_\_

NB: Should you have more information and require more space, please include on a separate piece of paper.

## ESTATE PASSINGS

- a) Do you wish for your estate to pass to your spouse if such spouse survives you?  Yes  No
- b) If your spouse does not survive you and you have children, either natural or adopted, do you wish your Estate to pass to your children equally?  Yes  No
- c) If your spouse does not survive you and your children are provided for (in b above), do you wish to be also made for the children of any child of yours (i.e. grandchildren) dying before you?  Yes  No
- d) If you wish children and/or grandchildren to share as in (b) and (c), please state at what age you wish them to take. The legal age is now 18 but some people still prefer 21 or older. You wish 18 or please indicate.  Yes  No

*NB: Unless it is specifically desired to exclude a child, it may be inappropriate to specifically name children in a Will because of the possibility of further children.*

- e) In the event that all of the above provisions fail, please state full names and addresses for other beneficiaries, their relationship to you and their ages (if known).

*NB: We suggest that you each nominate a beneficiary(ies). Eg, 1/2 share to parents of (1) and 1/2 share to parents of (2)*

*NB: After marriage, a new Will should be immediately considered as marriage automatically revokes a Will. However, divorce does not revoke your Will in Victoria. (It is important to understand that the tax treatment of your superannuation has changed in the last few years. If it goes directly to a dependant, then there is no tax payable, however if it goes to a non-dependant then it attracts a 15% tax. It is important that you get professional advice on this issue. Please ask your client advisor for the current position if this is likely to affect you).*

# Beneficiary Nomination

## BENEFICIARY NOMINATION

1. Family Name: \_\_\_\_\_ Given Name: \_\_\_\_\_

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

Relationship: \_\_\_\_\_ Age: \_\_\_\_\_ Share Unit or %: \_\_\_\_\_

Age at which share will be made available (if person is currently under 18 years of age): \_\_\_\_\_

2. Family Name: \_\_\_\_\_ Given Name: \_\_\_\_\_

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

Relationship: \_\_\_\_\_ Age: \_\_\_\_\_ Share Unit or %: \_\_\_\_\_

Age at which share will be made available (if person is currently under 18 years of age): \_\_\_\_\_

3. Family Name: \_\_\_\_\_ Given Name: \_\_\_\_\_

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

Relationship: \_\_\_\_\_ Age: \_\_\_\_\_ Share Unit or %: \_\_\_\_\_

Age at which share will be made available (if person is currently under 18 years of age): \_\_\_\_\_

4. Family Name: \_\_\_\_\_ Given Name: \_\_\_\_\_

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

Relationship: \_\_\_\_\_ Age: \_\_\_\_\_ Share Unit or %: \_\_\_\_\_

Age at which share will be made available (if person is currently under 18 years of age): \_\_\_\_\_

5. Family Name: \_\_\_\_\_ Given Name: \_\_\_\_\_

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

Relationship: \_\_\_\_\_ Age: \_\_\_\_\_ Share Unit or %: \_\_\_\_\_

Age at which share will be made available (if person is currently under 18 years of age): \_\_\_\_\_

*NB: If any beneficiary is under the age of 18 years, please state at what age it is desired they take. (eg, at 18 years of age or over).*

NB: Should you have more information and require more space, please include on a separate piece of paper.



# Guardian of Dependents



## GUARDIAN NOMINATION

1. Family Name: \_\_\_\_\_ Given Name: \_\_\_\_\_

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

Relationship: \_\_\_\_\_

2. Family Name: \_\_\_\_\_ Given Name: \_\_\_\_\_

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

Relationship: \_\_\_\_\_

3. Family Name: \_\_\_\_\_ Given Name: \_\_\_\_\_

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

Relationship: \_\_\_\_\_



## TRUSTEE'S POWER

At this point of planning for your Will, your solicitor will have sufficient detail to enable them to consider what Trustee Powers are necessary to facilitate the proper administration of your Estate. (It is important that you understand the power you give to your trustee).

Such powers considered, will include:

- a) Power to apply capital or income for the maintenance, education or benefit in life of any minor beneficiary.
- b) Power of Appropriation - to enable the beneficiaries to receive their interest in the Estate in cash or in kind.
- c) Investment powers that are appropriate in the circumstances. Generally we suggest that reasonably wide investment powers be given to enable the Trustee to have flexibility in today's ever-changing economic environment. Please raise any specific wishes or concerns you may have about investment powers with your Client Advisor if you wish.
- d) Power to lease and manage real estate.
- e) Power to deal with any business or partnership interest which you may have.
- f) Where life interests (payment of income only) are involved, a non-apportionment clause to deal with income calculations at the commencement and end of the life interest.
- g) Power of advancement to pay capital to life income beneficiaries in certain circumstances.

# General Information

## GENERAL INFORMATION

To assist your Executors in administering your Estate, we should be pleased if you would complete the following:

- a) Do you have a current Will?  Yes  No
- b) Do you have assets in Victoria?  Yes  No
- c) Do you have assets outside of Victoria?  Yes  No
- d) Where are your security documents normally held?  Yes  No
- e) Do you have your own Solicitor?  Yes  No  
If yes, please provide:  
Full Name \_\_\_\_\_  
Name of Firm: \_\_\_\_\_
- f) If yes, do you wish for that firm to prepare your Will?  Yes  No
- g) If no, would you wish for Peninsula Taxation and Business Centre to recommend a solicitor to prepare your Will?  Yes  No
- h) Do you have an accountant/tax agent to prepare your income tax return?  Yes  No  
If yes, please provide:  
Full Name: \_\_\_\_\_  
Name of Firm: \_\_\_\_\_
- i) Do you have a broker or investment advisor for your investment advise?  Yes  No  
If yes, please provide:  
Full Name: \_\_\_\_\_  
Name of Firm: \_\_\_\_\_
- j) Do you have a current Power of Attorney? It is in the interest of most clients to have a dormant Enduring Power of Attorney to deal with their financial needs in the event of an emergency. Your Peninsula Taxation and Business Advisor will discuss this at your interview.  Yes  No

# Assets, Liabilities & Location

## ASSETS, LIABILITIES & LOCATION

To comply with the current "Capital Gains Tax Legislation", it is important that your Executors are aware of increased details of your Assets and Liabilities than were previously required, and as such, request that you complete the following schedule to assist. (Attach a separate list if necessary).

### ASSETS

Type	Present Value	Owner	SJO	TIC
a) Residence	_____	1) _____	<input type="checkbox"/>	<input type="checkbox"/>
		2) _____	<input type="checkbox"/>	<input type="checkbox"/>
b) Investment Property/Real Estate	_____	1) _____	<input type="checkbox"/>	<input type="checkbox"/>
Address: _____		2) _____	<input type="checkbox"/>	<input type="checkbox"/>
_____				
c) Household goods and personal effects	_____	1) _____	<input type="checkbox"/>	<input type="checkbox"/>
		2) _____	<input type="checkbox"/>	<input type="checkbox"/>
d) Motor Vehicles/Boats/Caravans/Motorbikes	_____	1) _____	<input type="checkbox"/>	<input type="checkbox"/>
		2) _____	<input type="checkbox"/>	<input type="checkbox"/>
e) Investments/Shares/Unit Trusts	_____	1) _____	<input type="checkbox"/>	<input type="checkbox"/>
		2) _____	<input type="checkbox"/>	<input type="checkbox"/>
f) Banks, Credit Unions & Building Societies	_____	1) _____	<input type="checkbox"/>	<input type="checkbox"/>
		2) _____	<input type="checkbox"/>	<input type="checkbox"/>
g) Partnership/Business/Company	_____	1) _____	<input type="checkbox"/>	<input type="checkbox"/>
Address: _____		2) _____	<input type="checkbox"/>	<input type="checkbox"/>
_____				
Partners 1: _____				
Partners 2: _____				
Partners 3: _____				

*SJO = Sole Jointly Owned*  
*TIC = Tenants In Common*

# Assets, Liabilities & Location

Type	Present Value	Owner
h) Life Insurance		
Company: _____	_____	_____
Life Insured: _____		
Beneficial Owner: _____		
Company: _____	_____	_____
Life Insured: _____		
Beneficial Owner: _____		
i) Superannuation		
Company: _____	_____	_____
Number of Years: _____		
Nominated Beneficiary: _____		
j) Interests in Another Person's Estate	_____	_____
(Do you have a Power of Appointment over any assets in an Estate of Trust?)		
k) Other Assets		
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

# Assets, Liabilities & Location

## LIABILITY

Bank/Institution & Branch	Currently Owing	Owner	SJO	TIC
a) _____	\$ _____	1) _____	<input type="checkbox"/>	<input type="checkbox"/>
		2) _____	<input type="checkbox"/>	<input type="checkbox"/>
b) _____	\$ _____	1) _____	<input type="checkbox"/>	<input type="checkbox"/>
		2) _____	<input type="checkbox"/>	<input type="checkbox"/>
c) _____	\$ _____	1) _____	<input type="checkbox"/>	<input type="checkbox"/>
		2) _____	<input type="checkbox"/>	<input type="checkbox"/>
d) _____	\$ _____	1) _____	<input type="checkbox"/>	<input type="checkbox"/>
		2) _____	<input type="checkbox"/>	<input type="checkbox"/>
e) _____	\$ _____	1) _____	<input type="checkbox"/>	<input type="checkbox"/>
		2) _____	<input type="checkbox"/>	<input type="checkbox"/>

Loans From	Currently Owing	Owner	SJO	TIC
a) _____	\$ _____	1) _____	<input type="checkbox"/>	<input type="checkbox"/>
		2) _____	<input type="checkbox"/>	<input type="checkbox"/>
b) _____	\$ _____	1) _____	<input type="checkbox"/>	<input type="checkbox"/>
		2) _____	<input type="checkbox"/>	<input type="checkbox"/>

**Total Liabilities** \$ \_\_\_\_\_

**Total Assets** \$ \_\_\_\_\_

*SJO = Sole Jointly Owned*  
*TIC = Tenants In Common*

NB: If you do not have full particulars about your assets and liabilities available at present, DO NOT let this delay you in completing the balance of the form and discussing your Will Instructions with us. If required, the full particulars can be obtained at a later stage.

## WHAT TO DO WHEN A DEATH OCCURS

If the death occurs:

- at home—you should call your family doctor. He or she will certify the death.
- in a hospital or in a nursing home—the hospital or nursing home will certify the death.

You will need to contact family members and friends of the deceased. You may also wish to have a family member, a friend, a priest or minister or religion present to provide comfort and support at this time. Your family doctor may also be in a position to provide help. Any of these people may help you to get in touch with a funeral director.

If however, the funeral has been pre-arranged, you should contact the funeral director involved so that they may make the arrangements and set out on the pre-paid funeral certificate. If you have concerns about selecting a funeral director or the cost involved, the Australian Funeral Directors Association will be able to provide advice. Their telephone number is (03) 859 9571.

Certain veterans who have suffered war-caused incapacity may, if their death is accepted as war-related, be entitled to official commemoration of their gravesite. You should check with Veterans' Affairs before other arrangements are made.

Other matters that will need attention

There will be financial and other matters relating to the deceased that will require attention (e.g. cancellation of pension payments and provision of any appropriate benefits to surviving relatives or dependants). Some financial matters must be attended to by the executor of the deceased Will. A copy of the death certificate may be necessary and the funeral director will be able to help in this regard.

# Contact Check List for the Deceased

## CHECK LIST

Have I contacted:

Family doctor to certify death?	_____	Ph: _____
Hospital/Nursing to certify death?	_____	Ph: _____
Family?	_____	Ph: _____
	_____	Ph: _____
	_____	Ph: _____
	_____	Ph: _____
	_____	Ph: _____
Friends?	_____	Ph: _____
	_____	Ph: _____
	_____	Ph: _____
	_____	Ph: _____
	_____	Ph: _____
Funeral Director?	_____	Ph: _____
Priest/Minister?	_____	Ph: _____
Others:		
Department of Veterans' Affairs?		Ph: _____
Bank?		Ph: _____
Solicitor?		Ph: _____
Department of Social Security?		Ph: _____
Taxation Office?		Ph: _____
Road Traffic Authority?		Ph: _____
Health Benefit Fund?		Ph: _____
State Electricity Commission?		Ph: _____
Telecom?		Ph: _____
Gas & Fuel Corporation?		Ph: _____
Local Council?		Ph: _____
Board of Works?		Ph: _____
Electoral Office?		Ph: _____
Ex-service Organisations?		Ph: _____
Clubs and Professional Bodies?		Ph: _____

## THE FOLLOWING LIST OF PAPERS AND DOCUMENTS SHOULD BE IN ORDER AND KEPT IN A SAFE PLACE

### **Birth and Marriage Certificates**

These document important family details

### **Your Will**

This is a legal document which expresses your wishes in regard to distribution of your property after your death. It authorises a person (your executor) to act according to your wishes. It also prevents confusion arising among dependants, relatives and friends. It should reflect your current wishes.

### **Property Deeds**

These include title to your House and Land. They prove ownership of property. If the property is under mortgage, the original title will be held by the mortgagee (bank, building society, etc).

### **Lease Agreements**

These papers provide details in relation to any property that you are leasing.

### **Taxation Records**

You should keep copies of at least your most recent returns and assessments. These assists someone in deciding how to deal with financial affairs.

### **Insurance Policies**

These include policies for house or personal effects—records rights under the policy as well as procedures for renewal or cancellation.

### **Life Insurance/Superannuation Policies**

These provide a record of the payments and income to which you are entitled.

### **Papers representing other assets (shares, debentures etc)**

These represent your title to sometimes quite valuable property

### **Details of Bank Accounts and Other Investments**

Provides information as to where money is held.

The above papers should be kept in a secure place (e.g. bank safe deposit, trustee company, solicitor etc)