

**WILL INSTRUCTIONS OF .....**

Please tell us what you would like to include in your will. If you are not sure at this stage, we can discuss your options when we meet. Please try to give as much information as possible.

**WHAT DO YOU WANT TO INCLUDE IN YOUR WILL?**

**Full name:**

**Any other names that you are known by:**

**Main address:**

**Date of birth:**

**Have you already made a will or codicil?**  
Yes/No

**If yes, please give details below.**

**Date of will/codicil:**

**Have you married or formed a civil partnership since you made your last will?**

**Do your current wishes differ greatly from your last will?**

**DOMICILE**

**Domicile can affect your tax status. Are you domiciled in the UK or elsewhere?**  
Yes/No

**If not, please state where you are domiciled:**

Please read the attached briefing note about domicile if you are not sure. If you think you are not UK domiciled we can discuss this in more detail when we meet.

### SCOPE OF YOUR WILL

Do you want your will to cover your worldwide assets? If you have property in another country you may need to make a separate will for those assets and limit this will to exclude those assets.

Yes/No

### CHOICE OF LAW

Do you want to consider making a choice of which country's law should apply to your will?

Yes/No

This might be useful if you own assets in another European country. We can discuss this when we meet.

### WISHES FOR FUNERAL OR DISPOSAL OF BODY

Please select ALL of the following option(s) you have chosen.

Buried

Cremated

Woodland or ecological burial

Disposal of body for scientific research

Disposal of body for transplants or corneal grafting

Please give any other instructions below:

### MARRIAGE OR CIVIL PARTNERSHIP

Are you expecting to get married or enter into a civil partnership in the near future?

Yes/No

(We can add an extra clause to ensure your will continues to be effective.)

If yes, please give the full name of the person you expect to marry or form a civil partnership with:

## EXECUTORS

**Who do you want to act as your executors?**

Full name:

Relationship to you:

Full name:

Relationship to you:

**If your chosen executor cannot act, or they die before you, who should replace them as executors?**

Full name:

Relationship to you:

## GUARDIANS

**Who would you like to act as the guardian(s) of any children under 18 years should both you and the other parent die? (You should discuss this with the other parent and proposed guardian(s).)**

Full name:

Relationship to you:

Full name:

Relationship to you:

**Are you acting as a guardian for someone else's children?**

Yes/No

**If yes, you can appoint your successor in your will. Please give details below if this applies to you:**

Full name of minor(s) for whom you are a guardian:

Full name of successor guardian(s):

## PERSONAL POSSESSIONS

Do you want to give all or some of your personal possessions to a particular person or a group of people? You can ask your executors or your surviving spouse or partner to deal with this according to your written wishes if you like. Please give details below:

All personal possessions?

Yes/No

Details of specific personal possessions to be gifted:

Who would you prefer to deal with this gift following your written wishes? Please select one of the following options:

Executor(s)

Spouse or partner

Others

Who should pay for the costs of packing, shipping and insurance? Please select one of the following options:

Your estate

The person(s) receiving the gift(s)

## PROVIDING FOR YOUR PET(S)

Do you want to make any provision for what will happen to a pet after you have died? Please select one of the following options:

Give pet to an animal charity together with a donation for its upkeep.

Give pet to a friend or a member of your family with a gift to cover its upkeep.

Instruct executors to euthanise the pet.

Other (give details below):

**Do you want to leave instructions or helpful information about your pet in a letter to assist the person who will care for it?**

Yes/No

### CASH GIFTS

**Do you want to make any cash gifts? Please give details below:**

Amount (£):

Name of person receiving the gift:

Address:

Index linked:

At a particular age (for example, at 21 or 25):

If relevant, gift to be on first death or after death of surviving spouse or partner?:

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Amount (£):

Name of person receiving the gift:

Address:

Index linked:

At a particular age (for example, at 21 or 25):

If relevant, gift to be on first death or after death of surviving spouse or partner?:

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Amount (£):

Name of person receiving the gift:

Address:

Index linked:

At a particular age (for example, at 21 or 25):

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Amount (£):

Name of person receiving the gift:

Address:

Index linked:

At a particular age (for example, at 21 or 25):

If relevant, gift to be on first death or after death of surviving spouse or partner?:

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## GIFTS TO CHARITY

Your beneficiaries may be able to claim a 10% reduction in inheritance tax if you give 10% or more of your estate to charity. Please ask for more details when we meet.

Please give details of gift(s).

Name of charity:

Charity registration number:

Address:

Amount (£):

Any special purposes or for general purposes of charity:

If relevant, should the gift be on first death or after death of surviving spouse or partner:

Name of charity:

Charity registration number:

Address:

Amount (£):

Any special purposes or for general purposes of charity:

If relevant, should the gift be on first death or after death of surviving spouse/partner?

## GIFTS OF LAND AND BUILDINGS

Please give the following details:

Title and address of property:

Full name of beneficiary:

If the property is mortgaged do you want the beneficiary to pay off the mortgage (the beneficiary might have to sell the property to pay this) or should it be paid from your estate?  
Please select one option:

Beneficiary

Estate

Do you want the beneficiary to pay any inheritance tax on the gift (the beneficiary may need to sell the property to pay this) or should the tax be paid from your estate? Please select one option:

Beneficiary

Estate

Title and address of property:

Full name of beneficiary:

Do you want the beneficiary to pay any mortgage or should it be paid from your estate? (The beneficiary may need to sell the property to pay this.) Please select one option:

Beneficiary

Estate

Do you want the beneficiary to pay any inheritance tax on the gift or should tax be paid from your estate? (The beneficiary may need to sell the property to pay this.) Please select one option:

Beneficiary

Estate

## RIGHT TO OCCUPY PROPERTY

**Do you want to give anyone a right to occupy any of your property?**

**If yes, please select one of the following options:**

Right to occupy for the rest of their life, but no trust arrangements

Right to occupy for the rest of their life under a life interest trust

Right to occupy for a period of time (for example, one year from death or until they find somewhere else)

Not sure but would like to discuss when we meet

### RELEASE OF DEBTS

**Do you want to release anyone from an obligation to repay any debts they owe you at your death?**

**Please give details:**

Name of debtor:

Amount owed:

Is there evidence of the debt in writing?

Name of debtor:

Amount owed:

Is there evidence of the debt in writing?

### NIL RATE BAND GIFT OR TRUST

**Do you want to make a gift of your available inheritance tax nil rate band to a trust? (Remember that if you do not make a gift of any unused nil rate band, it can be added to your spouse or civil partner's nil rate band to reduce the tax bill when they die.) Please select one of the following options:**

Yes, I would like to make a gift of my nil rate band.

No, I would prefer to leave my nil rate band for my spouse/partner to claim on their death.

Not sure, I would like to discuss when we meet.

**Have you previously been widowed and remarried?**

Yes/No

**(If so, you may have more than one available nil rate band.)**

**INHERITANCE TAX**

**If you make large gifts in your lifetime and do not survive a further seven years, the recipient may need to pay any extra inheritance tax that is charged as a result. Do you want the recipient to pay this extra tax or should it be paid from your estate? Please select one of the following options:**

Recipient pays extra tax

Estate pays extra tax

**Gifts in your will. Do you want the beneficiary to pay the inheritance tax on their gift or your estate? Please select one of the following options:**

Beneficiary pays tax

Estate pays tax

Not sure (we can discuss at our meeting)

**GIFT OF RESIDUARY ESTATE**

**Your residuary estate is what is left after all the other gifts, tax, funeral and administrative expenses are paid. Who do you want to inherit what is left? Please select the options that apply:**

Spouse or civil partner outright gift

Spouse or civil partner life interest

Children outright in equal shares at 18, 21, 25 or no set age

Grandchildren outright in equal shares at 18, 21, 25 or no set age

Charities

On continuing trusts (for example, discretionary trust or life interest trust)

**VULNERABLE BENEFICIARIES**

**Do you want assets to be held in trust for a vulnerable beneficiary? (This could simply be someone who cannot manage money.)**

Name of vulnerable beneficiary:

Details of vulnerability (for example, disabled, bad with money or addiction):

### ASSET PROTECTION

**Are any of your beneficiaries likely to become divorced or bankrupt in the near future? (There are steps you can take to protect their inheritance).**

Yes/No

**If yes, we can discuss your options when we meet.**

### CHILDREN FROM PREVIOUS RELATIONSHIP

**Do you want to ensure that any children from a previous relationship are provided for when you die?**

Yes/No

**If yes, we can discuss your options when we meet.**

**Please provide details of any children who are not related to you by blood (step-children or children treated as a child of the family but who are not adopted):**

### LONG STOP BENEFICIARIES

**If your planned gifts fail (for example, because all your chosen beneficiaries die before you) who do you want to benefit? This could be one person, a group of people (such as nephews and nieces), a charity or any mixture of these.**

Name(s) of specific person(s):

Description of group of people:

Name of charity (and charity registration number):

Other (give details):

**ENDURING POWER OF ATTORNEY OR LASTING POWER OF ATTORNEY**

**Have you made an Enduring Power of Attorney or a registered Lasting Power of Attorney?**

Yes/No

**Please provide details of anything else you think we ought to know:**

**Please note any additional questions you would like to raise at our meeting:**

**PLEASE SEND THIS FORM TO US BEFORE OUR MEETING OR BRING IT WITH YOU.**