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## Estate Questionnaire

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### Background:

1. Full Legal Name : \_\_\_\_\_
2. Other Names Known By : \_\_\_\_\_
3. Date of Birth and Place : \_\_\_\_\_
4. Occupation : \_\_\_\_\_
5. Annual Income : \_\_\_\_\_
6. Residence Address : \_\_\_\_\_
7. Telephone: (Residence) \_\_\_\_\_  
(Business) \_\_\_\_\_  
(Cell) \_\_\_\_\_
8. E-mail Address : \_\_\_\_\_
9. Citizenship : \_\_\_\_\_

### Marital Status:

10. Marital status : \_\_\_\_\_
11. Spouse's Name: \_\_\_\_\_

12. Is there a marriage contract or domestic contract? \_\_\_\_\_  
(If so, please provide a copy)

13. Previous marriage by either spouse? \_\_\_\_\_

If so, particulars of which spouse: \_\_\_\_\_

(i) Date and place of divorce : \_\_\_\_\_

(ii) Name of previous spouse : \_\_\_\_\_

(iii) Children of previous marriage:  
(if disabled, indicate nature of disability)

Name and Gender

Birth Date and Age

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

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

**Children:**

14. Children of present marriage:  
(if disabled, indicate nature of disability)

Name and Gender

Birth Date and Age

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

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

15. Any children not mentioned because there is no intention to benefit or because they were born outside of marriage?

\_\_\_\_\_

**Dependents:**

16. Any dependents or legal obligations to support another person in addition to your spouse and children, or have been providing actual support to anyone then your spouse and children?

Name

Birth Date

Nature of Support

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

**Previous Documents:**

17. Is there a previous Will? \_\_\_\_\_  
(If so, please obtain copy)
18. Does your spouse have a Will? \_\_\_\_\_

**Assets:**

19. House (in whose name and how is it held) Value  
\_\_\_\_\_

Mortgage, if any, amount and outstanding amount

\_\_\_\_\_

Is this a matrimonial home?

\_\_\_\_\_

20. Other Real Properties (in whose name and how is it held?) Value  
\_\_\_\_\_

Location, mortgage, date purchased

\_\_\_\_\_

21. Approximate value of household items: \_\_\_\_\_



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27. Small Business/Sole Proprietorship  
Name, type

Value

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28. Pension Plans

**Note - is beneficiary to take if spouse's statutory right is elected?**

Beneficiary Designations

Company

Pension Plans

R.R.S.P.

R.I.F.

C.P.P.

Other

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29. Life Insurance

Company

Policy #

Beneficiary Designations

Type

Value

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30. Banking

Name of Bank

Location

Amount

Accounts jointly held \_\_\_\_\_

\_\_\_\_\_

Account in your name \_\_\_\_\_

\_\_\_\_\_

Safety deposit box \_\_\_\_\_

Other \_\_\_\_\_

31. Are you presently receiving benefits from an estate or trust? If so, provide particulars:

\_\_\_\_\_

31. Other Assets (specify):

\_\_\_\_\_

**Instructions for Will:**

32. Initial Executors (full legal name and relationship)

\_\_\_\_\_

\_\_\_\_\_

33. Alternate Executors (full legal name and relationship)  
(They will be called upon if the initial executor predeceases or is unable to act or if spouse makes statutory entitlement election)

\_\_\_\_\_

\_\_\_\_\_

34. Special Executors  
(ie. Majority? Foreign Executor? Agency? Business? Power of Attorney?  
if spouse makes statutory entitlement election?)

\_\_\_\_\_

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35. Disposition of clothing, jewellery, personal effects, household goods, furniture, automobiles:

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36. Cash legacies:

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37. Special Bequests  
(ie. jewellery, art, individual articles)

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38. Charitable Bequests (full legal or registered name of charity and address, if applicable):

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39. Residue :  
If Spouse and/or Child  
(i) provisions for Spouse  
(outright in trust)

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(ii) provisions for children  
(including age at which to receive capital ie. distribution)

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(iii) other beneficiaries

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If no spouse or child alive, who will participate?

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Failure Clause - if none of above beneficiaries alive or if all die in common accident:

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40. Funeral Instructions

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41. Custody of children and guardianship of their assets.

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### **Instructions for Powers of Attorney**

1. Power of Attorney for Personal Care

Initial Attorney (full legal name and relationship)

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Alternate Attorney (full legal name and relationship)

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Consider section 47 (1) of the *Substitute Decisions Act*

a.) Does grantor have the ability to understand whether the proposed attorney has a genuine concern for the person's welfare?

- b.) Does the grantor appreciate that the person may need to have the proposed attorney make decisions for the person?

2. Power of Attorney for Property

Initial Attorney (full legal name and relationship)

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Alternate Attorney (full legal name and relationship)

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Consider section 8 of the *Substitute Decisions Act*

- a.) Does the grantor know what kind of property he or she has and its approximate value?
- b.) Is the grantor aware of obligations owed to his or her dependants?
- c.) Does the grantor know that the attorney will be able to do on the person's behalf anything in respect of property that the person could do if capable, except make a will, subject to the conditions and restrictions set out in the POA?
- d.) Does the grantor know what the attorney must account for his or her dealings with the person's property?
- e.) Does the grantor know that he or she may, if capable, revoke the POA?
- f.) Does the grantor appreciate that unless the attorney manages the property prudently its value may decline?
- g.) Does the grantor appreciate the possibility that the attorney could misuse the authority given to him or her?