APPLICANT 1

FULL LEGAL NAME	MR MRS MISS MS DR		
MARITAL STATUS	SINGLE DEFACTO MARRIED DIVORCED WIDOWED		
GENDER	MALE FEMALE	**DATE OF BIRTH**	_____/_____/_____
LICENCE NUMBER		**ORIGIN OF BIRTH**	AUSTRALIA OVERSEAS
LICENCE EXPIRY DATE	_____/_____/_____	**Country if OVERSEAS**	
ARE YOU A SMOKER?	YES NO	RESIDENT	YES NO
MOTHER'S MAIDEN NAME		CITIZENSHIP	YES NO
		VISA TYPE #	

DEPENDENTS	**Child's Name**	**Age**	**Date of Birth**

CONTACT DETAILS

HOME PHONE	
MOBILE PHONE	
WORK PHONE	
EMAIL	

ADDRESS

CURRENT ADDRESS		☐ OWNER ☐ WITH RELATIVES ☐ RENTING $
	FROM: _____/_____/_____ - TO: _____/_____/_____	CURRENT ☐
PREVIOUS If current < 3 years		☐ OWNER ☐ WITH RELATIVES ☐ RENTING $
	FROM: _____/_____/_____ - TO: _____/_____/_____	CURRENT ☐

EMPLOYMENT

CURRENT EMPLOYER		
FULL TIME ☐	Position:	
PART TIME ☐	ABN:	Phone Number:
CASUAL ☐	Address:	
CONTRACT ☐	BASE INCOME:	ABOVE BASE:
SELF EMP ☐	FROM: _____/_____/_____ - TO: _____/_____/_____	☐ CURRENT
PREVIOUS	If current < 3 years	
FULL TIME ☐	Position:	
PART TIME ☐	ABN:	Phone Number:
CASUAL ☐	Address:	
CONTRACT ☐	BASE INCOME:	ABOVE BASE:
SELF EMP ☐	FROM: _____/_____/_____ - TO: _____/_____/_____	☐ CURRENT

JUDGEMENTS & POOR CREDIT HISTORY

YES or NO	Specify:

REFERANCE of Relative / Friend NOT LIVING WITH YOU

Full Name:	Phone:
Address:	Relationship:

APPLICANT 2

FULL LEGAL NAME	MR MRS MISS MS DR		
MARITAL STATUS	SINGLE DEFACTO MARRIED DIVORCED WIDOWED		
GENDER	MALE FEMALE	**DATE OF BIRTH**	_____/_____/_____
LICENCE NUMBER		**ORIGIN OF BIRTH**	AUSTRALIA OVERSEAS
LICENCE EXPIRY DATE	_____/_____/_____	**Country if OVERSEAS**	
ARE YOU A SMOKER?	YES NO	RESIDENT	YES NO
MOTHER'S MAIDEN NAME		CITIZENSHIP	YES NO
		VISA TYPE #	

DEPENDENTS	**Child's Name**	**Age**	**Date of Birth**

CONTACT DETAILS

HOME PHONE	
MOBILE PHONE	
WORK PHONE	
EMAIL	

ADDRESS

CURRENT ADDRESS		☐ OWNER ☐ WITH RELATIVES ☐ RENTING $
	FROM: _____/_____/_____ - TO: _____/_____/_____	CURRENT ☐
PREVIOUS If current < 3 years		☐ OWNER ☐ WITH RELATIVES ☐ RENTING $
	FROM: _____/_____/_____ - TO: _____/_____/_____	CURRENT ☐

EMPLOYMENT

CURRENT EMPLOYER		
FULL TIME ☐	Position:	
PART TIME ☐	ABN:	Phone Number:
CASUAL ☐	Address:	
CONTRACT ☐	BASE INCOME:	ABOVE BASE:
SELF EMP ☐	FROM: _____/_____/_____ - TO: _____/_____/_____	☐ CURRENT
PREVIOUS	If current < 3 years	
FULL TIME ☐	Position:	
PART TIME ☐	ABN:	Phone Number:
CASUAL ☐	Address:	
CONTRACT ☐	BASE INCOME:	ABOVE BASE:
SELF EMP ☐	FROM: _____/_____/_____ - TO: _____/_____/_____	☐ CURRENT

JUDGEMENTS & POOR CREDIT HISTORY

YES or NO	Specify:

REFERANCE of Relative / Friend NOT LIVING WITH YOU

Full Name:	Phone:
Address:	Relationship:

STATEMENT OF POSITION

ASSETS

	DESCRIPTION	VALUE	RENTAL INCOME	APPLICANT 1	APPLICANT 2
OWNER OCCUPIED PROPERTY				☐	☐
INVESTMENT PROPERTY				☐	☐
INVESTMENT PROPERTY				☐	☐
INVESTMENT PROPERTY				☐	☐
INVESTMENT PROPERTY				☐	☐
CONTENTS	Home Contents			☐	☐
SUPERANNUATION	Approximate Superannuation Balance (Applicant 1)			☐	☐
SUPERANNUATION	Approximate Superannuation Balance (Applicant 2)			☐	☐
MOTOR VEHICLE				☐	☐
PROPERTY 2				☐	☐
SHARE PORTFOLIO				☐	☐
SAVINGS ACCOUNT				☐	☐
SAVINGS ACCOUNT				☐	☐
SAVINGS ACCOUNT				☐	☐
OTHER				☐	☐
OTHER				☐	☐
OTHER				☐	☐

LIABILITIES

	BANK	LIMIT	AMOUNT OWING	MONTHLY PAYMENT	To Be PAIDOUT	APPLICANT 1	APPLICANT 2
OWNER OCCUPIED LOAN						☐	☐
OWNER OCCUPIED LOAN						☐	☐
INVESTMENT LOAN						☐	☐
INVESTMENT LOAN						☐	☐
INVESTMENT LOAN						☐	☐
INVESTMENT LOAN						☐	☐
PERSONAL LOAN						☐	☐
PERSONAL LOAN						☐	☐
LEASE						☐	☐
CREDIT CARDS						☐	☐
OTHER						☐	☐

SECURITY INFORMATION

PROPERTY 1

Property Address				
Value			**Debt Against The Property**	
Property Owners				
Property Type	OWNER OCCUPIED PROPERTY ☐		INVESTMENT PROPERTY ☐	
Weekly Rental				
Property Details	**BEDROOMS**		SINGLE STORY ☐	DOUBLE STOREY ☐
	BATHROOMS		BRICK ☐	WEATHERBOARD ☐ CONCRETE ☐
	CAR SPACE		TILE ☐	COLORBOND ROOF ☐
	LAND SIZE sqm			
Insurance Held With				
Access Contact Name			**Contact Details**	

PROPERTY 2

Property Address				
Value			**Debt Against The Property**	
Property Owners				
Property Type	OWNER OCCUPIED PROPERTY ☐		INVESTMENT PROPERTY ☐	
Weekly Rental				
Property Details	**BEDROOMS**		SINGLE STORY ☐	DOUBLE STOREY ☐
	BATHROOMS		BRICK ☐	WEATHERBOARD ☐ CONCRETE ☐
	CAR SPACE		TILE ☐	COLORBOND ROOF ☐
	LAND SIZE sqm			
Insurance Held With				
Access Contact Name			**Contact Details**	

PROPERTY 3

Property Address				
Value			**Debt Against The Property**	
Property Owners				
Property Type	OWNER OCCUPIED PROPERTY ☐		INVESTMENT PROPERTY ☐	
Weekly Rental				
Property Details	**BEDROOMS**		SINGLE STORY ☐	DOUBLE STOREY ☐
	BATHROOMS		BRICK ☐	WEATHERBOARD ☐ CONCRETE ☐
	CAR SPACE		TILE ☐	COLORBOND ROOF ☐
	LAND SIZE sqm			
Insurance Held With				
Access Contact Name			**Contact Details**	

WILL FACT FIND
AND EXPRESSIONS OF INTENTION

1. CLIENT CIRCUMSTANCES

PRIOR WILLS

Does the client have a previous Will? Yes No

MARRIAGE

Are the clients intending to or may marry? Yes No
(marriage revokes a Will, but we can include a clause that makes the Will valid if the client/s happen to marry)

Have any of the clients been married previously? If so, are there any ongoing property matters or has settlement occurred?

_____

_____

User 18/12/2014 1:38 PM
Comment [1]: Note that the new Will automatically revokes the current Will . The clients should let the solicitor who prepared their current Will know it is no longer current. We can assist with this.

User 18/12/2014 1:38 PM
Comment [2]: Important to include for all de facto couples, unless they are absolutely sure they will not marry

Jessica Amberley 19/11/2014 2:24 PM
Comment [3]: Divorce does not revoke an entire Will, only any dispositions to the spouse. Incomplete property settlement means assets are not settled and may pass to former spouse when this is not intended.

2. WILL INFORMATION

EXECUTOR DETAILS

Names and addresses of Executor and back-up Executor:

_____
_____
_____
_____
_____
_____
_____
_____

SPECIFIC GIFTS

Are any items to be given to specific people?

_____
_____
_____
_____

BALANCE OF ESTATE

Tick/fill out as applicable

_____ Everything to spouse

_____If they have passed away, then to children their in equal shares

At what age should the children control their inheritance?

_____ % at 18 _____ % at 21 _____ % at25 _____ % at30

Jessica Amberley 19/11/2014 2:35 PM

Comment [4]: This first section represents a standard/usual distribution where husband and wife wish to benefit one another and then their children.

_____If any of their children has passed away, then that share to their children (clients grandchildren) in equal shares

At what age should the grandchildren control their inheritance?

_____ % at 18 _____ % at 21 _____ % at25 _____ % at30

If both clients pass away with no children, how should the estate be distributed?

Jessica Amberley 19/11/2014 2:36 PM

Comment [5]: Usual instructions here are to split the estate 50/50 between the husband's and wife's family, be that parents or brothers/sisters (please list names).

If the above does not apply, how do the clients wish to distribute their estate?

Jessica Amberley 19/11/2014 2:37 PM

Comment [6]: If the clients do not fall into the 'usual' distribution, please make notes here of the client's intentions. Split families are common and there are many solutions for them. Your role is to work out what the client wants to achieve and note it down, and we can work out the best legal solutions for them.

Jessica Amberley 21/7/2016 12:38 PM

Comment [7]: If the clients do not fall into the 'usual' distribution, please make notes here of the client's intentions. Split families are common and there are many solutions for them. Your role is to work out what the client wants to achieve and note it down, and we can work out the best legal solutions for them.

MINORS

Release of Funds

Should the Executor be able to release money to children while they are minors?

Yes No

User 18/12/2014 1:40 PM

Comment [8]: A Power of Advancement allows for money to be released prior to the beneficiary taking control of their share. It is commonly included.

If yes, for what reasons can they release it?

_____ For the maintenance, education and benefit of the child

_____ For a residential house deposit

_____ For the purchase of a safe car

Any other reasons: _____

_____

_____

Guardian

Guardian details:_____

_____

Relationship to client_____

FUNERAL

Any instructions: I.e. Burial or Cremation

Client 1: _____

_____

Client 2: _____

_____

Jessica Amberley 19/11/2014 2:43 PM

Comment [9]: Burial or cremation are the most common instructions, although clients can be as detailed as they wish. It is not necessary to include any instructions if the clients does not wish to.

OTHER

Any other notes:

CLIENT SIGN OFFS

Instructions to act as Will

I declare that these instructions represent my testamentary intentions and are intended to act as my Will for a period of 8 weeks from the date of signing (at which time I revoke this instruction), revoking all previous Wills or testamentary dispositions for that period of time.

Jessica Amberley 19/11/2014 2:53 PM
Comment [10]: This protects the client for a period of 8 weeks after signing so that the notes from your meeting can act as a Will if necessary.

…….. Date:
Sign

…….. Date:
Sign

Authority to Email

I give permission for my Will and Enduring Powers of Attorney (as applicable) including signed copies of these documents to be sent to me by email.

…….. Date:
Sign

…….. Date:
Sign

Not Legal Advice

I have been advised that Frank Xirihais not a lawyer and that the advice I have received from him/her is general in nature and is not intended or should be relied upon as legal advice. I have been advised that any matters which have arisen in the course of our discussion which require legal advice will be discussed with me/us by a lawyer from Legal Essentials.

Jessica Amberley 19/11/2014 2:54 PM
Comment [11]: Fill in your name here. This clause acts to protect you.

…….. Date:
Sign

…….. Date:
Sign