



**Advocates
Notaries Public
Commissioners for Oaths**

**Corlett Bolton & Co is the
trading name of Corlett Bolton &
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Fri - Closed)

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(Mon – Fri 9.00am-5.30pm)

**VAT Registration: 001 0496 36
Company Number 126261C**

WILL QUESTIONNAIRE

Name:

In completing this questionnaire we would ask that you first read through the notes as these shall provide assistance. The notes can be found on our website: www.corlettbolton.com/Reading-Room/Wills--Notes-for-Clients.aspx

Please feel free to use additional paper if necessary.

Section 1: Your Personal details

1. Your full name including title and all forenames: Any other names by which you may be known (and your maiden name if applicable):

2. Your address:

3. Your telephone numbers and your e-mail address:
Please indicate if any of these methods are not secure and you do not wish them to be used for communications in connection with your Will.

4. Your date of birth:

5. Your nationality:

6. Your place of domicile:
Please see the notes for guidance on your domicile.

7. Your residence for tax purposes:

8. Your occupation, employer and length of employment:
 - b. If you are self employed do you own your own business? If so please provide details:

Section 2: Your family

9. Are you (please circle the appropriate answer):

Married / in a Civil Partnership / Single / Separated / Divorced / Cohabiting?

10. Date of Marriage/Civil Partnership:

11. Have either of you been married/ in a civil partnership before?

Please provide name(s) of former spouse(s); date of marriage(s) and divorce(s) and details of any Matrimonial Orders made.

12. If you are a married woman please give your husband's full name, date of birth and occupation:

This information would be required by the Registrar on registration of your death.

13. If you are currently not married do you intend on marrying/remarrying in the near future?

14. Details of your children/grandchildren:

If the answer to question 11 is yes, please give the names and ages of the children of your previous marriage and/or those of your spouse (whichever is applicable).

Full Name:

Age:

Date of Birth:

Address (if different to yours):

In full time Education/Higher Education?

Full Name:

Age:

Date of Birth:

Address (if different to yours):

In full time Education/Higher Education?

Full Name:
Age:
Date of Birth:
Address (if different to yours):

In full time Education/Higher Education?

Full Name:
Age:
Date of Birth:
Address (if different to yours):

In full time Education/Higher Education?

b. Do any of your children have a disability?

15. Details of any other of your other nearest relatives, including their names, addresses and ages of any under the age of 18:

16. Name and contact details of the person you wish to be contacted in the event of your death:

Section 3: Your Property and other assets and liabilities

17. Details of your real estate in the Isle of Man

- a. Do you own your home or is it rented?

If you own your home do you own it:

Alone or in joint names with your spouse/ partner / civil partner

Please delete as appropriate

- b. What is the current estimated value of your property?
- c. Is your property mortgaged? If so please give details
- d. Do you own any other real estate? Please provide the address and estimated value? if that property is mortgaged, please provide details

18. Asset details

- a. Assets on the Isle of Man
 - i. Please provide details of your bank/building society/post office accounts.
 - ii. Please provide details of any other investments/Stocks, Shares/National Savings
 - iii. Please provide details of your pension rights (including name and address of company and pension reference number). Have you given any instructions to the pension trustees as to who is to be benefit on death?

- iv. Please provide details of your Life Insurance Policies (including name and address of company and Policy numbers and location of the Policy documents).

- v. Please provide details of any specific items of value i.e. Antiques/Jewellery/Cars / vehicles/Special Collections (e.g. coins, stamps etc)

- vi. Have you inherited any substantial asset i.e real estate/money in the past 10 years? Please provide details

- vii. Do you have any interest under any Trust or Settlement? If so please give the name and date of the Trust and the names and addresses of the Trustees.

- viii. Name and address of your Accountant/Stockbroker/Financial or Tax Advisor if you have one.

b. Assets elsewhere

- i. If you own assets (real estate, bank accounts, investments) abroad, please give details:

19. Please provide us with details of your main liabilities other than any mortgage mentioned above i.e. loans, overdraft, credit cards

Section 4 – Administration of your estate

Previous Wills

20. Have you ever made a Will before? If so, it would be helpful if you supplied a copy of your old Will.
- b. If you have previously made a Will, have you entered into any agreement with any other person (e.g. a spouse or previous spouse) in connection with the terms of that Will? If so, please supply a copy.
21. Have you or do you intend to make a Will dealing with assets in another jurisdiction? If so please specify the jurisdiction and whether or not the Will is in existence. If it is possible for you to supply a copy of any existing Will, this would be helpful.
22. Please state the jurisdictions in which this Will is to be effective ie. Isle of Man only or Worldwide
Please remember that if you have investments in the UK (for example shares in English companies, or bank or Building Society accounts) they will be outside the Manx jurisdiction. You may need to get advice on the tax implications of your Will.
23. Do you have any power of appointment under any Trust or Settlement? If so please supply details of the Trust/Settlement by giving its name and date and the names and addresses of the Trustees together with a copy of the instrument creating your right of appointment.
Please say in whose favour and to what extent you wish to exercise the power of appointment in your will.

Funeral and Burial Arrangements

24. Do you have any specific funeral wishes? Please specify any instructions with regard to funeral/burial/cremation and your wishes with regard to the transplant of parts of your body.

Executors and Trustees

25. The names, addresses and occupations of the persons you wish to nominate as your Executors/Trustees (who shall administer your Will).

Beneficiaries can be and often are Executors. If you would prefer to appoint a professional Executor, Corlett Bolton & Co would be happy to provide this service. Full details will be supplied upon request.

Testamentary Guardians

26. Name and address of any guardians of any children under the age of 18.

Section 5: Your Beneficiaries

27. Details of any specific gifts of your personal belongings (i.e. pieces of jewellery, furniture, etc) and any specific gifts of money

28. Beneficiaries of the rest of the estate after the specific bequests (residue) (for example, your spouse/children/parents)

29. Substituted beneficiaries of the residue in the event that your nominated beneficiary/beneficiaries) predecease you i.e. grandchildren/spouse of deceased beneficiary

30. The age at which you wish children to inherit any gifts of money or the residue. What restrictions (if any) do you wish to place on any earlier availability of any of these gifts for the purpose of education, maintenance etc (50% only of capital and income to be used; income only to be used but not capital; in the absence of

specification Manx law provides essentially that 50% of both capital and income can be used)

31. Are your grandchildren or any of the children you intend to benefit under your Will, children of unmarried parents? This information is needed as being born outside marriage may affect their entitlement to take their parents' share of the residue of your estate by substitution.

Section 6: Further information

32. Once the Will has been created would you like us to store the original in our safe custody or do you wish to store it elsewhere?

33. Does anyone who is to benefit under the Will owe you money?

34. Is there anyone who may expect to benefit under your Will but to whom you intend to leave nothing or less than he/she may expect?

Section 7: Enduring Power of Attorney

35. In addition to preparing a Will, do you wish us to prepare an Enduring Power of Attorney?

If so:

- (a) please give the full names and addresses of the attorney(s);

(b) please state if there any special conditions you would want to impose as your attorney(s). For example, you could say that the power is not to be used until you are medically certified as being incapable of managing your affairs or if your attorney was not to deal with a certain asset belonging to you

“I authorise you/ I do not authorise you to discuss any matter relevant to the making of my Will (including financial matters) [with _____
(i.e. spouse/partner/)] *delete as appropriate*

I authorise you to transmit my personal data by e-mail:

YES	<input type="checkbox"/>
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NO	<input type="checkbox"/>
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NB: If you do not understand any of the questions or are uncertain as to how to answer them please do not hesitate to contact us for advice.

Signed

Dated

Corlett Bolton & Co.

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Corlett Bolton & Co is the trading name of Corlett Bolton & Co Limited (Company Number 126261C)
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