



Probate Questionnaire

The purpose of this questionnaire is to gather the information necessary to help you with your case. In order for us to begin the legal process, please complete this questionnaire as accurately as possible. Please call if you have any questions about this form. Accuracy is very important, so you may need to do some homework to determine the answers to some of the questions. If you need more room for any answer, please use the reverse side and indicate that you have done so.

I. DECEDENT

- Name of Decedent (Include any aliases, nicknames or maiden names):

- Birth date and place of birth (City, County and State):

- Date of death _____ Age _____ Soc. Sec. # _____ - _____ - _____

- Cause of death _____ Medicaid # _____

- Physical address (domicile) at time of death: (Street, City, County and State)

- Approximate date domicile established? _____

- Residence at time of death (if different from physical address): Street, City, County and State:

- Telephone at time of death: Home: _____ Business: _____

- Who is currently receiving Decedent's mail? _____

- What address is Decedent's mail going to? _____

- Occupation of Decedent (or if retired, please indicate this and list prior occupation):

YES _____ NO Unknown
Location/Description

- Was Decedent ever divorced? YES NO
- Date and location of Decedent's divorce _____
- Are there child support or maintenance orders for Decedent's divorce?

CHILD SUPPORT MAINTENANCE NONE

If so, please state monthly amount owed and to whom it is paid: _____

- Was Decedent ever widowed YES NO
- Decedent's sources of income at time of death (circle all that apply)

Salary/Hourly wages Retirement Income (401K, PERA, IRA)
Social Security Income Other _____

- List any IRA's of Decedent: _____
- List any 401k's of Decedent (or other retirement benefit accounts, i.e. PERA):

- Was Decedent due money from any estate at time of death?

YES \$ _____ NO Unknown
Amount Due

Whose Estate

Probate Court and Case No.

- Information about Decedent's banking institutions:

<u>Name</u>	<u>Location</u>	<u>Type of Account</u>	<u>Current Balance</u>
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- List any Stocks, Bonds or Certificates of Deposits owned by Decedent:

<u>Name</u>	<u>Location</u>	<u>Amount</u>
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- Did Decedent have Insurance on the following?

Life:	YES _____	NO
	Name of Carrier	

Home:	YES _____	NO
	Name of Carrier	

Accidental Death:	YES _____	NO
	Name of Carrier	

Personal Property:	YES _____	NO
	Name of Carrier	

- Was Decedent a shareholder in a corporation at time of death?

YES	NO
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Name of corporation: _____

Address of Corporation: _____

Number of Shares Owned: _____

- Did decedent own a business at time of death?

YES NO

Name: _____

Type of Business: _____ Entity (Corp. LLC, etc.): _____

Business Partners: (Names) _____

Address (Street, City, County, State):

- Did anyone owe money to Decedent at time of death? YES NO

(If YES) Name: _____ Phone: _____

Address: _____

Amount Owed: _____ Reason for Debt: _____

II. SURVIVING SPOUSE

- Name of Surviving Spouse (if applicable):

- Birth date and place of birth of Surviving Spouse (City, County and State):

- Social Security number of Surviving Spouse: _____

- If Spouse is deceased, date and place of death (City, County and State):

- Occupation of Surviving Spouse, or if retired, previous occupation:

- Telephone: _____ Business: _____

- Are there any Pre- or Post-Nuptial agreements between Decedent and their Spouse at time of death?

YES (Pre or Post?) _____ NO

III. WILLS, CODICILS AND TRUSTS

- Date of Will: _____

- Date of Codicil(s) (written additions to will): _____

- Location of Original Will: _____

- Location of Codicil(s): _____

- Has the will been probated? YES NO

- Has a personal representative been appointed for the estate? YES NO

- Did Decedent leave a written Memorandum disposing of tangible personal property?
(circle one)

YES _____ NO
Location

- Does Decedent have a living trust? YES NO

- If so, what property is in the trust?

- Did Decedent have a power of attorney at time of death? YES NO

IV. OTHER FAMILY – LIST HERE ANY PARENTS, CHILDREN, GRANDCHILDREN, BROTHERS, SISTERS OR BENEFICIARIES LISTED IN THE DECEDENT’S WILL, CODICILS OR TRUSTS.

Name Address(Street, City, State) Relationship Soc. Sec. # Birthday

OTHER FAMILY – LIST HERE ANY PARENTS, CHILDREN, GRANDCHILDREN, BROTHERS, SISTERS WHO ARE NOT LISTED IN THE DECEDENT’S WILL, CODICILS OR TRUSTS.

Name Address(Street, City, State) Relationship Soc. Sec. # Birthday

V. TAX PREPARERS, CPA, FINANCIAL ADVISORS, OTHER ATTORNEYS OF DECEDENT.

Name Address Phone Relationship

VI. BURIAL PLANS

• Are there any outstanding debts for Decedent’s funeral/burial? Yes No

• If so, how much money is owed and to whom?

Amount Owed To Whom Address/Phone

VII. REAL ESTATE OF DECEDENT – LIST ALL REAL PROPERTY OWNED BY DECEDENT AT THE TIME OF DEATH, WHETHER IT IS MORTGAGED OR NOT, AND INDICATE HOW THE TITLE IS HELD: D

= IN DECEDENT'S NAME ONLY; JT = IN JOINT TENANCY; O = OTHER (EXPLAIN).

Description – Location - How Title Held - Current Mortgage - Market Lien/Amount Value

- Is it possible that anyone else has placed their real property in joint tenancy with Decedent? (Circle One)

YES _____ NO
Explain

- Is there a preference of Decedent or applicant as to real estate appraisers if needed?

YES _____ NO
Name and Phone Number

VIII. SAFETY DEPOSIT BOX

- a. Box #: _____
- b. Name of bank: _____
- c. Name/relationship of any co-tenant: _____
- d. Does anyone have access to the box now? _____
Name/relationship

IX. DEBTS AND EXPENSES

- **Credit Cards**

Bank Account Number Balance Monthly Payment Due Date of Pmnts

- Are any of Decedent's debts currently being paid? YES NO

- If so, please list which debts are being paid and by whom:

<u>Describe debt being paid</u>	<u>By whom</u>	<u>Amount being paid</u>

- Have any of Decedent’s creditors been notified of Decedents death? YES NO

If so, by whom and by what means: _____

X. PERSONAL PROPERTY

- Did Decedent own any personal property individually?
(Circle all that are applicable)

- | | |
|---|-----------------------------------|
| Clothing and Miscellaneous Personal Effects | Jewelry |
| Stamp Collection | Coin Collection |
| Other Collection _____ | Works of Art |
| Furs | Rare Books |
| Valuable Antiques | Tools and Equipment |
| Misc. Household Goods and Furnishings | Livestock |
| Farm Products | Claim for Salary |
| Insurance Premium Refund Due | Income Tax Refund Due |
| Other Refunds Due Decedent | Trademarks |
| Patents | Club Memberships |
| Pending Lawsuits | Tickets (sports or theatre) Other |
| Miscellaneous Personal Property | |

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- Was any personal property owned by Decedent as tenant In common?

YES NO

- Was any personal property owned by Decedent as a joint tenant?

YES NO

XI. VEHICLES OF DECEDENT

- *Description of Vehicle #1:* _____

- Vin (Vehicle Identification Number): _____

- Is vehicle licensed? YES NO

- Is vehicle insured? YES NO

- Is vehicle co-owned? YES NO

- Is title to be transferred? YES NO To Whom: _____

- *Description of Vehicle #2:* _____

- Vin (Vehicle Identification Number): _____

- Is vehicle licensed? YES NO

- Is vehicle insured? YES NO

- Is vehicle co-owned? YES NO

- Is title to be transferred? YES NO To Whom: _____

XII. TAXES

- Did Decedent owe income taxes in year of death? YES NO

- Did Decedent file federal and Colorado income tax returns for each of the preceding four years?

YES NO

- Did Decedent work for wages or salary during current year?

Telephone 303.839.1770

303 E. 17th Avenue, Ste. 910
Denver, CO 80203

e-mail kim@willoughbylaw.com
website www.willoughbylaw.com

YES NO

- Did Decedent ever file gift taxes? YES NO

XIII. DOCUMENTS TO BRING TO YOUR NEXT MEETING

- ___ Certified Copy of Death Certificate
- ___ All signed copies of Decedent's will (or copy if original is not available)
- ___ All signed copies of Decedent's Codicils
- ___ Copies of all Trusts created by or for the benefit of Decedent or of which Decedent was a trustee (including current financial statement of each trust)
- ___ Copy of Decedent's obituary notice
- ___ Decedent's Financial Documents at time of Death
- ___ Deeds to all real estate owned by Decedent
- ___ If real estate was not paid for, bring loan number, payment book and address of mortgage company or other note holder and copies of notes.
- ___ Original bonds, including Series E and Series H bonds
- ___ Original Stock Certificates owned by Decedent (or latest statement if stocks are held by a broker with name and address of firm where held)
- ___ If Decedent served in the military, bring certificate of discharge or separation
- ___ Partnership, "buy-sell", employment, stock purchase, stock option and other agreements signed by Decedent and pensions, profit-sharing plans and IRA's.
- ___ Most recent monthly statements for each checking or savings account
- ___ All notes and accounts payable to decedent and the name and address of each debtor.
- ___ All policies of insurance, including life, accident, disability, fire and casualty, and health insurance in which Decedent had an interest.
- ___ Titles to all automobiles or motor vehicles registered in the name of Decedent and if subject to a lien, payment book, name and address of each lienholder.
- ___ Copies of Decedent's financial statements for the last three years and copies of all notes payable.
- ___ Copy of funeral bills including cemetery lot, monuments, flowers and memorial service fees.
- ___ Copies of any will under which Decedent inherited any property in the last ten years
- ___ Copies of Decedents last three tax returns and ALL gift tax returns ever filed by Decedent
- ___ If Decedent owned a business, provide most recent balance sheet and last five year's Profit and Loss statements; or provide name of person to contact regarding same.
- ___ Any Pre- or Post-Nuptial agreements, dissolution of marriage agreements or court order regarding spousal or child support and property division.