

Estate Planning Checklist

PERSONAL INFORMATION		
	YOU	YOUR SPOUSE
FULL NAME:		
DATE OF BIRTH:		
PLACE OF BIRTH:		
ADDRESS:		
OCCUPATION:		
EMPLOYER:		
HOME TELEPHONE:		
BUSINESS TELEPHONE:		
E-MAIL ADDRESS:		
MARITAL STATUS:		
IF MARRIED, DATE AND PLACE OF MARRIAGE:		
PREVIOUS MARRIAGES:	YES NO	YES NO
IF YES, NAME OF FORMER SPOUSE AND DATE OF DEATH/DIVORCE/SEPARATION:		
OBLIGATIONS PURSUANT TO PREVIOUS MARRIAGE(S) (I.E. SPOUSAL AND CHILD MAINTENANCE):		
IF YOU ARE SINGLE, SEPARATED OR DIVORCED, ARE YOU PLANNING ON MARRYING IN THE NEAR FUTURE:	YES NO If yes, with whom:	YES NO If yes, with whom:

CHILDREN, GRANDCHILDREN AND OTHER DEPENDENTS			
NAME	RELATIONSHIP TO YOU	DATE OF BIRTH	ADDRESS, IF DIFFERENT

Are there any stepchildren, adopted children or children born outside of marriage of either you or your spouse? YES NO

Are you responsible for any other children? YES NO

Are any of your grandchildren adopted, stepchildren, born outside of marriage? YES NO
 If yes to any of the above questions, give particulars:

Are any of the children or grandchildren mentally or physically incapacitated? YES NO
 If yes, please describe:

Are you responsible for any dependent adults who are mentally or physically incapable of handling their own affairs? YES NO

If yes, provide particulars:

Have any of your children predeceased you? YES NO

If yes, give the name and date of death of the deceased child and the names of his/her children, if any:

ASSETS

TYPE OF ASSET	PARTICULARS: IDENTIFICATION NUMBER OR DESCRIPTION, NAME AND LOCATION OF ISSUING INSTITUTION	AMOUNT OR VALUE
LIFE INSURANCE:		
PENSION PLANS/ANNUITIES:		
RRSPs:		
RRIFs:		
BANK ACCOUNTS:		
BONDS, STOCKS, GICs, MUTUAL FUNDS:		

VALUABLE PERSONAL PROPERTY:		
PARTNERSHIP, UNINCORPORATED BUSINESS, SHARES IN PRIVATE CORPORATIONS:		
REAL ESTATE HOLDINGS:		

Any other assets not listed above:

- Have you an interest in any assets outside Ontario? YES NO
- Have you an interest in any assets outside Canada? YES NO
- Have you an interest in another estate or trust? YES NO
- Have you made any loans or advances to family members or others that are to be collected or that you wish to be forgiven? YES NO
- Have you an interest in farmland? YES NO
- Do you own any property in joint tenancy with someone not described above? YES NO
- Are you the owner of a life insurance policy on the life of another person? YES NO

Please provide particulars of any "yes" answers.

LIABILITIES

TYPE OF LIABILITY	PARTICULARS: IDENTIFICATION NUMBER OR DESCRIPTION, NAME AND LOCATION OF ISSUING INSTITUTION	AMOUNT OR VALUE
MORTGAGES:		

INSTRUCTIONS FOR WILL	
NAME OF EXECUTOR(S):	ADDRESS:
NAME OF ALTERNATE EXECUTOR(S):	ADDRESS:
GUARDIANS FOR MINOR CHILDREN:	
FULL NAME(S):	
RELATIONSHIP:	
ADDRESS:	

DISTRIBUTION OF ESTATE

All to spouse?
If no, describe:

YES NO

- If spouse predeceases:
- (a) equally to all children
 - (b) all to children but different percentages
 - (c) different percentages to particular children

At what age are your children to receive their share of your estate? _____ years

If one child dies before you do, or before attaining the age at which he/she is entitled to the share, who shall receive that share or the amount remaining?

- the children of the deceased child (my grandchildren)
- my surviving children
- other:

INSTRUCTIONS FOR POWERS OF ATTORNEY

POWER OF ATTORNEY FOR PERSONAL CARE:	
NAME OF ATTORNEY:	ADDRESS:
NAME OF ALTERNATE ATTORNEY	ADDRESS:
ANY SPECIFIC INSTRUCTIONS:	
CONTINUING POWER OF ATTORNEY (PROPERTY):	
NAME OF ATTORNEY:	ADDRESS
NAME OF ALTERNATE ATTORNEY	ADDRESS
ANY SPECIFIC INSTRUCTIONS:	