

(For office use only)

Our Ref:

Date Rec'd:

Strictly Private and Confidential



Premier Solicitors

Islamic Will Questionnaire



A full list of our members of CIOT, ICSA, STEP & SFE can be found on our website.

Please specify whether these instructions relate to:

Single Will

Mirror Wills for co-habiting couple

Mirror Wills for married couple / civil partnership

1. HOW DID YOU HEAR ABOUT US?

Are you an existing client of Premier Solicitors? Yes (ref: _____) / No

If not, where did you hear about our Services?

Newspaper: name: _____ Internet:

Recommended by: Charity:

Leaflet: Other:

2.1 YOUR PERSONAL DETAILS

Title: Mr / Mrs / Miss / Ms / Other

Surname: _____ Forename(s): _____

Alias:

Address: _____ Post Code: _____

Telephone No(s): Home: _____ Work: _____

Mobile: _____ Email: _____

Date of birth: _____ Country of Birth: _____

Marital Status: _____ Occupation: _____

2.2 YOUR SPOUSE / PARTNER'S DETAILS

Title: Mr / Mrs / Miss / Ms / Other

Surname: _____ Forename(s): _____

Alias:

Address: _____ Post Code: _____

Telephone No(s): Home: _____ Work: _____

Mobile: _____ Email: _____

Date of birth: _____ Country of Birth: _____

Marital Status: _____ Occupation: _____

Have either of you previously made a Will? Yes / No

If yes, where is the original kept:
(please forward us a copy)

Free storage required? Yes / No

2.3 YOUR PERSONAL CIRCUMSTANCES

1. Are you married to your partner? Yes / No
2. If not, do you intend to marry or enter into a civil partnership in the future? Yes / No
3. If yes, is the Will to be effective ONLY after the marriage or civil partnership has taken place? Yes / No
4. Are you separated from your spouse or intending to separate? Yes / No
5. Do you have a spouse or partner who will NOT be included in your Will? Yes / No
6. Have either of you been married before? Yes / No
7. Do either of you pay towards the maintenance of any person who will NOT benefit under your Will? Yes / No
8. Does the Will have to be read to you due to impaired vision? Yes / No
9. Will you have problems understanding the written English in the Will? Yes / No
10. Will you have problems signing your Will due to physical incapability? Yes / No
11. Do you consider yourself to be permanently resident in England & Wales? Yes / No
12. Are either of you a beneficiary under a current trust? Yes / No

***Please provide additional information on the additional information sheet (last page)**

3. DETAILS OF CHILDREN

Full Name of Child	Full Address	Date of Birth
1.		
2.		
3.		
4.		
5.		

Are any of your children born outside marriage, adopted, or step children? Yes / No
If yes, please provide additional information on the additional information sheet (last page)

Do any of the children have any handicap or learning difficulties?

Yes / No

If yes, please provide additional information on the additional information sheet (last page)

4. YOUR ESTATE

If you provide us with details of your assets and liabilities, we can carry out our basic **free** inheritance tax health check and advise you on whether you require a tax planning meeting and advice.

Type of Asset	Value (£)	If jointly owned, with whom and relationship to you	Any other information
House / Flat (main residence)			
Any other House/Flat			
Contents & Furniture			
Car			
Jewellery			
Cash in accounts			
National Savings / Premium Bonds			
Quoted Stocks & shares			
Business Interest or Partnership Share			
Unquoted shares (in private company)			
Overseas assets			
Other:			
TOTAL			

Liability Type	Value (£)	If joint liability, with whom and relationship to you	Any other information
Mortgage			
Loans			
Credit Cards			
Other:			
TOTAL			

Life Assurance Policies

Life Insurance Company	Policy Number	Sum Assured	Premiums	Why this was taken out (e.g. protect your mortgage, tax planning)	Is this policy written in trust? Yes / No / Not Known

Pension Death Benefits

Pension Scheme / Policy	Amount of Death Benefit	Amount of Widow's / Widower's Pension	Death Benefit in Trust? Yes / No	Have you made a written request as to whom you wish to benefit on your death? Yes (please give details) / No / Not Known

Are gifts made by either of you exceeding £3,000 per annum? Yes / No
 If yes, please provide additional information on the additional information sheet (last page)

Do you use or have a Financial Advisor in place? Yes / No

Name:

Company:

Address:

Tel:

Email:

Do you use or have an Accountant in place? Yes / No

Name:

Company:

Address:

Tel:

Email:

5. YOUR EXECUTORS

Your Executor(s) is the person(s) you appoint in your Will to wind down and distribute your estate. If you only wish to name one person as Executor then please name a substitute in case your main Executor is unable to act. Most clients like to have one professional Executor (Premier Solicitors) alongside family members.

Main Executor - Please tick one of the following options:

1. Premier Solicitors on their own
2. Premier Solicitors alongside your spouse / partner
3. Premier Solicitors alongside another
4. Another on their own

Your Full Name	Full Name of your Executor	Full Address of your Executor	Relationship to your Executor	Agreed to act?
	1.	1.	1.	Yes / No
	2.	2.	2.	Yes / No
	1.	1.	1.	Yes / No
	2.	2.	2.	Yes / No

Please provide additional information on the additional information sheet (last page) – max of 4

Substitute Executor - Please tick one of the following options:

1. Premier Solicitors on their own
2. Premier Solicitors alongside another
3. Another on their own

Your Full Name	Full Name of your Substitute Executor	Full Address of your Substitute Executor	Relationship to your Substitute Executor	Agreed to act?
	1.	1.	1.	Yes / No
	2.	2.	2.	Yes / No
	1.	1.	1.	Yes / No
	2.	2.	2.	Yes / No

Please provide additional information on the additional information sheet (last page) – max of 4

6. YOUR GUARDIANS

If you wish to appoint guardians for any children below the age of 18, then please provide details below.

Your Full Name	Full Name of your Guardian	Full Address of your Guardian	Relationship to your Guardian	Agreed to act?
				Yes / No
Your Full Name	Full Name of your Substitute Guardian	Full Address of your Substitute Guardian	Relationship to your Substitute Guardian	Agreed to act?
				Yes / No

7. GIFTS OF MONEY

If you wish to make any cash gifts then please provide details below. Unless you specify otherwise, a child will receive their gift at the age of 18. It is possible to postpone a gift until the child is older but there may be negative tax implications. **Please note, in accordance with Islamic law, you can only gift a maximum of 1/3 of your estate to your chosen individuals and / or charities; please do consider Islamic charities.**

Cash Amount (£)	Name of Recipient?	Full Address	Relationship To You?	When? (delete as appropriate)
1.				On 1 st death On 2 nd death Both deaths
2.				On 1 st death On 2 nd death Both deaths
3.				On 1 st death On 2 nd death Both deaths
4.				On 1 st death On 2 nd death Both deaths
5.				On 1 st death On 2 nd death Both deaths

8. SPECIFIC GIFTS

If you wish to leave any specific items or personal belongs then please provide details below.

Alternatively, if you wish to leave a separate note requesting your Executors to distribute your personal possessions in accordance with a list prepared by you then please tick here

Item	Name of Recipient?	Full Address	Relationship To You?	When? (delete as appropriate)
1.				On 1 st death On 2 nd death Both deaths
2.				On 1 st death On 2 nd death Both deaths
3.				On 1 st death On 2 nd death Both deaths
4.				On 1 st death On 2 nd death Both deaths
5.				On 1 st death On 2 nd death Both deaths

9. THE RESIDUE OF YOUR ESTATE

The residue is the remainder (or all of your estate if you have not made any earlier gifts) of your estate, after the payment of your debts, taxes and any gifts.

Are you happy for the rest of your estate to pass in accordance with Islamic law? Yes / No

Please provide any further details you feel are relevant:

10. CLAIMS AGAINST YOUR ESTATE

It is possible for certain persons to make a claim on your estate if it can be shown that at the time of your death your Will does not make reasonable provision for them. Any claim allowed, would be assessed by the Court. If it was anticipated that such a claim could arise it might be advisable to leave a letter to your Executor setting out any special circumstances relevant to any possible claim. The persons that may have a right to apply to the Court are:

- * Any spouse / civil partner
- * Any partner of yours, if you have lived as man and wife or civil partners for at least 2 years prior to your death
- * Any former husband or civil partner provided he or she has not remarried or has entered into a subsequent civil partnership, or an order of the Court bars any claim
- * Any child of yours
- * Any person not being your own child who in the case of any marriage of yours was treated by you as a child of the family in relation to that marriage
- * Any other person who immediately prior to your death was being maintained wholly or in part by you

If you are excluding any of the above individuals then please provide details of who, and the reasons for exclusion.

11. FUNERAL WISHES

Funeral wishes: Burial

Please provide additional information on the additional information sheet (last page)

12. OTHER SERVICES

Now that you have put in place arrangements following your death, you should also think about putting in place similar arrangements during your life to ensure that you have the correct planning in place.

1. Do you understand the advantages of a Lasting Power of Attorney? Yes / No

Do you wish to appoint someone to deal with your **Property and Financial Affairs** should you become incapable of doing so yourself? Yes / No

Do you wish to appoint someone to deal with your **Health and Personal Welfare** should you become incapable of doing so yourself? Yes / No

2. Do you understand the advantages of a Home Protection Trust? Yes / No

Do you wish to protect your property from third party creditors and give easy access to your chosen beneficiaries following your death, so that your property is not tied up in a costly and time consuming probate process? Yes / No

3. Are you a business owner, or shareholder? Yes / No

If yes, do you wish to book an appointment with our Company / Commercial Solicitor for a **free** compliance check (advice on the requirement of key documents) Yes / No

13. DECLARATION

I / We confirm the information given above is correct and complete.

I / We confirm that I/We am/are over the age of 18 and am/are of sound mind.

In addition to my / our general instruction(s) in my / our Will, I / we agree to our Executor(s) and Trustee(s) having normal powers to aid the administration of my / our estate. I / We do not know of any other trusts / restraints which would prevent my / our estate being distributed as I / we have requested.

I / We understand that if following the preparation of my / our draft Will(s) being prepared, I / We change my / our instructions, I / We understand that Premier Solicitors reserve the right to charge additionally for such work.

I / We confirm acceptance of the terms of business set out in the accompanying letter and enclosed Terms of Business and that my / our continuing instructions amount to acceptance of such terms of business.

Signed Signed Date:

I / We have completed my Will Questionnaire, what happens now?

- Return the completed questionnaire to our Head Office (Premier Solicitors, Premier House, Lurke Street, Bedford MK40 3HU).
- Following receipt of your questionnaire we aim to send your draft version(s) of your Will(s) within 2 weeks.
- Once you receive the draft(s), simply check that all is in order and call us to approve your draft Will(s). We will then prepare final version(s) for you to sign. If you are local we recommend that you visit us to sign your Will(s) in our Bedford office (we are also open Saturdays), or we can post your finalised Will(s) out to you for you to sign at home.

14. ADDITIONAL INFORMATION