



MABBOTT & COMPANY
BARRISTERS, SOLICITORS AND NOTARIES PUBLIC

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PROBATE / ESTATE INFORMATION FORM

SECTION 1 – PERSONAL INFORMATION						
			Date:			
Full name of Deceased:						
Also known as:						
Date of birth:				Date of death:		
Place of birth:				Address at time of death:		
Full name(s) of Executor(s):						
Complete address(es) of Executor(s):						
<u>Telephone number(s) of Executor(s)</u>						
Home phone:		Work phone:		Mobile phone:		
Residence of Deceased (list all residences, if more than one, over the last six years):						

Do you have an original Will?		YES	NO
Location of the original Will (complete address):			
<u>Witness(es) to Will/Codicil(s)</u>			
Full name:		Complete address:	
Occupation:		Relationship to Deceased:	
MARITAL INFORMATION			
Marital status (check all that are applicable):	Unmarried	Widowed	
	Married	Separated	
	Common-law	Divorced	
<u>Complete all applicable information below</u>			
If married:	Full name of Spouse:		
	Date of marriage:		
	Address:		
If common-law:	Full name of Spouse:		
	Address:		
If widowed:	Full name of deceased Spouse:		
	Date of death:		
If divorced or separated:	Full name of former Spouse:		
	Date of divorce or separation:		

	Address:	
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CHILDREN AND BENEFICIARIES

Children (complete in full)

Full name:		Full name:	
Date of birth:		Date of birth:	
Address:		Address:	
Full name:		Full name:	
Date of birth:		Date of birth:	
Address:		Address:	

Are there any pre-deceased children?	YES	NO
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If so, please provide the following information:	Full name:	
	Date of death:	

Children of deceased children (grandchildren) (complete in full)

Full name:		Full name:	
Date of birth:		Date of birth:	
Address:		Address:	

Are there any pre-deceased grandchildren?	YES	NO
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If so, please provide the following information:	Full name:	
	Date of death:	

<u>Beneficiaries not already listed (complete in full)</u>			
Full name:		Full name:	
Date of birth:		Date of birth:	
Address:		Address:	
Phone number:		Phone number:	
SECTION 2 – INVENTORY			
Real Estate – include mortgage(s), encumbrances, and joint interest(s):			
Value of Real Estate:			
Mines and minerals:			
Promissory Note(s):			
Safety Deposit Box:	YES	NO	
<u>Did the Deceased have any of the following</u>			
Bank Accounts and/or Investments	YES	NO	
Life Insurance:	YES	NO	
Policies owned on life of others:	YES	NO	
Annuities:	YES	NO	
Pensions:	YES	NO	
RRSP's, RRIF's, TFSA's or other like plans:	YES	NO	
If yes to any of the above, please provide bank statements as at time of death or earlier.			
Debts due to the Deceased:			
Interest in other Estates/Trusts:			
Employer benefits due (salary, death benefits, or other benefits):			

<u>Shares, bonds, etc. owned by Deceased</u>	
Type of shares:	
Number of shares:	
Location at death:	
Personal belongings: (Inventory and/or appraisals may be required)	
Household goods and furniture: (Inventory and/or appraisals may be required)	
Automobile(s) – indicate make, model serial no., and liens:	
Jewellery:	
Collections (coins, art, stamps, etc.):	
Other property:	
Debts due by Estate (including any lease commitments):	
SECTION 3 – INCOME TAX	
Year in which last Income Tax Return was filed:	
Income Tax Installments made:	YES NO
SECTION 4 – GENERAL	
Was Deceased a contributor to CPP?	YES NO
<u>If yes, who will make an application for Death Benefit and for Survivor's Benefit?</u>	
Full name:	

Immediate cash requirements:			
Do Executor(s) wish to advertise for creditors?	YES	NO	
Determine who will be responsible for collection of funds, payments of income, and distribution of residue:			
SECTION 5 – FUNERAL			
Funeral Home and expenses:			
Honorariums (minister, organist, soloist, etc.):			
Grave marker:			
Reception:			
Cremation/Interment:			
SECTION 6 – OTHER			