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## WILL PLANNING

### General Instructions

Please complete all information as thoroughly as possible. Keep in mind the following points:

#### \* NAMES AND ADDRESSES

You must print legibly the full legal names, aliases and addresses of all persons named in your Will. PLEASE ENSURE SPELLINGS ARE CORRECT.

#### \* EXECUTOR

Naming your executor is the most important decision you will make regarding your Will. Your executor will have the obligation of making funeral arrangements, probating your Will, collecting estate assets and, where necessary, paying estate debts and liabilities. Your executor must be at least 19 years of age and should be, if at all possible, a Canadian resident. Otherwise, the most important quality that your executor must have is honesty. You must trust your executor. You should probably choose somebody with whom you will have a long term relationship (usually a spouse or a child, but possibly a trust company). If your executor is an individual, it is preferable that your executor lives in fairly close proximity to you, but it is not absolutely necessary. You should also choose at least one (1) alternate executor. Your alternate executor should have the same qualities as your "prime" executor. You may have more than one executor, in which case your co-executors must act together. Ensure that you obtain consent from those persons who you wish to act as your executor(s). Your executor typically has the right to be paid for his or her services by your Estate.

#### \* SPECIAL INSTRUCTIONS

There are a number of situations that can arise which may affect your Will. It is therefore important to advise your lawyer of all your circumstances, concerns and future plans. For example, you should advise us about:

- planned marriages, separations, divorces, whether you have children from a previous marriage (including adopted children) step-children, step-grandchildren;
- if you have handicapped or dependent children;
- if you have plans to move to a different city or town;
- if you or your spouse are seriously ill or experiencing memory problems;
- if you are expecting to receive a significant inheritance or windfall;

#### \* WILLS STORAGE

Your Will must be kept in safekeeping in a place where it can be readily located when required and where it will be free from accidental loss or destruction. A lawyer's office is the best place for storage as most lawyers have special vaults to store important documents. Even if your lawyer moves or retires, if your Will is stored with the lawyer, there is always a record of where your Will is. For a number of reasons, your safe deposit box or your own personal safe located in your residence are not necessarily the best places for storage. Irrespective of where you store your Will, a Notice of where your Will is located should be filed with the Vital Statistics Agency in Victoria. Your lawyer will typically register your Will with Vital Statistics if you store your Will at his or her office.

\* **QUESTIONS:** If you have any questions about this worksheet, please call (250) 372-8811.

**WILL PLANNING WORKSHEET**

Date: \_\_\_\_\_

**1. Personal Information**

Full legal name:

Full legal name at birth:  
(if different from above)

Aliases:

Date of birth:

Place of birth:

Citizenship:

Home address:

Telephone - home:

Work:

Occupation:

Marital status (including plans to marry):

Full legal name of spouse (including common-law):

Spouses' Date of birth:

Spouses' Place of birth:

Spouses' Citizenship:

Date of marriage:

Place of marriage:

Do you have a marriage contract?    No                      Yes (attach copy)

Have you or your spouse been married before?    No                      Yes  
If yes, names(s):

Full legal names of your children (please indicate: step-children, adopted, child with a disability, or deceased):

<u>Name</u>	<u>Date of birth</u>

Do you have an existing Will? No Yes (attach copy)

**2. Information about Your Current Assets and Debts (please indicate if any of your assets are NOT in B.C.)**

Bank account(s) and term deposits:

<u>Name of Savings Institution</u>	<u>Owner(s) of Account</u>	<u>Amount</u>

Life Insurance:

<u>Name of Insurance Company</u>	<u>Owner of Policy</u>	<u>Designated Beneficiary</u>	<u>Amount</u>

RRSP(s):

<u>Name of Institution</u>	<u>Owner of Policy</u>	<u>Designated Beneficiary</u>	<u>Amount</u>

Stocks and Bonds (please indicate value and whether they are held in your name alone or jointly with someone else. Also indicate if there are any restrictions on trade of the shares):

Pension Plans and/or Annuities (please indicate whether they are held in your name alone or jointly with someone else):

Do you have an interest in a business? No Yes  
 If yes, describe (please indicate if your interest is a proprietorship, partnership, shareholder or assignee of book debts):

Real Estate:

<u>Address</u>	<u>Registered Owner(s)(Full Legal Name(s))</u>	<u>Estimated Value</u>	<u>Mortgage Balance</u>	<u>Mortgage Life Insured?</u>

Personal effects (home furnishings, automobiles, collectibles and antiques, etc.):

Are any of these articles jointly owned with someone else? No Yes  
 If yes, with whom?

Miscellaneous:

Do you have an interest in an existing estate or trust? No Yes

Do you have a safety deposit box? No Yes  
 If yes, location and box number:



Do you have the consent of all of the above person(s) to act as a trustee?      Yes    No

UNDER YOUR WILL, who do you wish to act as **guardian(s)** to your children who are under 19 years of age?

<u>Full Legal Name</u>	<u>Address</u>	<u>Relationship to you</u>	<u>Occupation</u>

Who will act as an **alternate guardian(s)**?

<u>Full Legal Name</u>	<u>Address</u>	<u>Relationship to you</u>	<u>Occupation</u>

Do you have the consent of all of the above person(s) to act as a guardian(s)?    Yes    No

Who do you wish to act as **executor** of your estate (preferably someone who lives in B.C. and is in close proximity)?

<u>Full Legal Name</u>	<u>Address</u>	<u>Relationship to you</u>	<u>Occupation</u>

Who will act as **alternate executor**?

<u>Full Legal Name</u>	<u>Address</u>	<u>Relationship to you</u>	<u>Occupation</u>

Do you have the consent of all of the above person(s) to act as executor?      Yes    No

Do you have any specific articles which you wish to leave to any particular person or charity?

<u>Full Legal Name</u>	<u>Address</u>	<u>Relationship to you</u>	<u>Gift</u>

How do you wish your remains to be disposed of?

