

**ESTATE CLIENT INTAKE FORM**

**Please complete the following form in its entirety. If you are uncertain about the meaning of some terms used in this document, please consult the “Instructions and Explanations” section at the end for assistance.**

**Documents included in Estate Package:** Statutory Durable POA – Medical POA – Directive to Physician – HIPPA forms – Declaration of Guardian – Declaration of Guardian of Child – Declaration of Disposition of Remains – Last Will and Testament

**PERSONAL INFORMATION**

Full Legal Name: \_\_\_\_\_

Other Names: \_\_\_\_\_

Email: \_\_\_\_\_

Ph: \_\_\_\_\_ DOB: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ ST: \_\_\_\_\_ Zip: \_\_\_\_\_ County: \_\_\_\_\_

Employer: \_\_\_\_\_

**MARITAL STATUS**

Single  Married  Divorced  Widowed Spouse Name: \_\_\_\_\_

Years of Current Marriage: \_\_\_\_\_ Have you been previously Married: Yes:  # \_\_\_\_\_ No:

Name of Previous Spouse (a): \_\_\_\_\_ How did this Marriage end? \_\_\_\_\_

Name of Previous Spouse (b): \_\_\_\_\_ How did this Marriage end? \_\_\_\_\_

**DESCENDANTS** (Attach additional sheets as needed.)

**Child One:** \_\_\_\_\_ Date of Birth: \_\_\_\_\_ # of Grandchildren: \_\_\_\_\_

Biological  Adopted  Stepchildren Other: \_\_\_\_\_

**Child Two:** \_\_\_\_\_ Date of Birth: \_\_\_\_\_ # of Grandchildren: \_\_\_\_\_

Biological  Adopted  Stepchildren Other: \_\_\_\_\_

**Child Three:** \_\_\_\_\_ Date of Birth: \_\_\_\_\_ # of Grandchildren: \_\_\_\_\_

Biological  Adopted  Stepchildren Other: \_\_\_\_\_

**Child Four:** \_\_\_\_\_ Date of Birth: \_\_\_\_\_ # of Grandchildren: \_\_\_\_\_

Biological  Adopted  Stepchildren Other: \_\_\_\_\_

Do any Children have a mental or health related impairment/disability? Yes:  No:  If so, please describe: \_\_\_\_\_

Is it possible you will have or adopt more children? Yes: \_\_\_\_\_ No: \_\_\_\_\_

Names of Any Deceased Children: \_\_\_\_\_

Did your Deceased Child(ren) have Children? Yes: \_\_\_\_\_ No: \_\_\_\_\_

If so, please include the names and ages of all children (grandchildren): \_\_\_\_\_

\_\_\_\_\_

### ASSETS

**Real Property Owned:** Please include all real property (house, condo, land) you own, including the address, the percentage of interest you own in the property and who you own it with.

Property 1 Address: \_\_\_\_\_

Ownership Interest: \_\_\_\_\_ Names of Other Owners: \_\_\_\_\_

Property 2 Address: \_\_\_\_\_

Ownership Interest: \_\_\_\_\_ Names of Other Owners: \_\_\_\_\_

You are welcome to attach additional sheets if needed.

**Bank Accounts/Financial Accounts:** List all Bank Accounts and other Financial Accounts you may have, such as investment accounts. This is to ensure **you** are aware of your assets and who you have named as your beneficiary and successor beneficiary on these accounts. Please note, account numbers are not needed.

Account #1: Type of Account: \_\_\_\_\_ Where is the Account Held? \_\_\_\_\_

Name of Beneficiary: \_\_\_\_\_ Name of Successor Beneficiary: \_\_\_\_\_

Account #2: Type of Account: \_\_\_\_\_ Where is the Account Held? \_\_\_\_\_

Name of Beneficiary: \_\_\_\_\_ Name of Successor Beneficiary: \_\_\_\_\_

Account #3: Type of Account: \_\_\_\_\_ Where is the Account Held? \_\_\_\_\_

Name of Beneficiary: \_\_\_\_\_ Name of Successor Beneficiary: \_\_\_\_\_

Account #4: Type of Account: \_\_\_\_\_ Where is the Account Held? \_\_\_\_\_

Name of Beneficiary: \_\_\_\_\_ Name of Successor Beneficiary: \_\_\_\_\_

**Cryptocurrency:** This section only needs to be completed if you own cryptocurrency, such as Bitcoin.

Type(s) of Cryptocurrency: \_\_\_\_\_ Estimated Value (if available): \_\_\_\_\_

Where is your private key held? \_\_\_\_\_

Who else has access to your private key? \_\_\_\_\_

Do you have a plan for your Cryptocurrency when you pass away? \_\_\_\_\_

**Life Insurance/Retirement Accounts:** List all Life Insurance Policies and Retirements Accounts (IRAs, 401(k)s, etc.). This is to ensure you are aware of your assets and who you have named as your beneficiaries on these policies/accounts to ensure they pass outside of probate.

Life Insurance:

1. Name of Company: \_\_\_\_\_ Name of Insured: \_\_\_\_\_

\_\_\_ Whole \_\_\_ Term Name of Beneficiary: \_\_\_\_\_ Death Benefit: \_\_\_\_\_

2. Name of Company: \_\_\_\_\_ Name of Insured: \_\_\_\_\_

\_\_\_ Whole \_\_\_ Term Name of Beneficiary: \_\_\_\_\_ Death Benefit: \_\_\_\_\_

Retirement Accounts:

1. Owner/Participant: \_\_\_\_\_ Type of Plan: \_\_\_\_\_

Value of Account: \_\_\_\_\_ Name of Beneficiary: \_\_\_\_\_

2. Owner/Participant: \_\_\_\_\_ Type of Plan: \_\_\_\_\_

Value of Account: \_\_\_\_\_ Name of Beneficiary: \_\_\_\_\_

**LAST WILL AND TESTAMENT**

Do you have a previous Will? Y/N: \_\_\_ If so, please provide to us a copy to review.

Do you have any previous Trusts? Y/N: \_\_\_ If so, please provide to us a copy to review.

**Beneficiaries:** Who would you like to designate as your **primary** estate beneficiary and **alternate** estate beneficiary?

**Primary** estate beneficiary:

Spouse: \_\_\_\_\_ Name: \_\_\_\_\_

Child(ren): \_\_\_\_\_ Name(s): \_\_\_\_\_

Other: \_\_\_\_\_ Name(s): \_\_\_\_\_

**Alternate** estate beneficiary:

Spouse: \_\_\_\_\_ Name: \_\_\_\_\_

Child(ren): \_\_\_\_\_ Name(s): \_\_\_\_\_

Other: \_\_\_\_\_ Name(s): \_\_\_\_\_

If both your Primary and Alternate estate beneficiaries were to pass away before you, who do you want to receive your assets/estate? \_\_\_\_\_

Would you like to Dis-inherit anyone? \_\_\_\_\_

**Bequests/Gifts:** If you would like to make any specific gifts (cash, property, or personal effects) to specific beneficiaries, please list the gift and recipient below:

Gift 1: \_\_\_\_\_ Recipient(s): \_\_\_\_\_  
 Gift 2: \_\_\_\_\_ Recipient(s): \_\_\_\_\_  
 Gift 3: \_\_\_\_\_ Recipient(s): \_\_\_\_\_  
 Gift 4: \_\_\_\_\_ Recipient(s): \_\_\_\_\_  
 Gift 5: \_\_\_\_\_ Recipient(s): \_\_\_\_\_  
 Gift 6: \_\_\_\_\_ Recipient(s): \_\_\_\_\_

You are welcome to attach additional gifts on a separate sheet if needed.

**Pet(s):** If you would like to make any specific gifts (cash, property, or personal effects) to specific beneficiaries, please list the gift and recipient below:

Pet 1: \_\_\_\_\_ Caretaker(s): \_\_\_\_\_  
 Pet 2: \_\_\_\_\_ Caretaker(s): \_\_\_\_\_

Would you like to include a clause for any pets you may own in the future?

Yes: \_\_\_\_ No: \_\_\_\_ Caretaker(s): \_\_\_\_\_

You are welcome to attach additional pets on a separate sheet if needed.

**Executors:** It is recommended that you appoint at least two (2) alternate Executors, should the primary Executor predecease you, decline the appointment, or become unable to serve. It is also encouraged to nominate a corporate entity as one of your alternate Executors.

Primary Executor: \_\_\_\_\_ Relationship: \_\_\_\_\_

1<sup>st</sup> Alternate Executor: \_\_\_\_\_ Relationship: \_\_\_\_\_

2<sup>nd</sup> Alternate Executor: \_\_\_\_\_ Relationship: \_\_\_\_\_

Will your executor be compensated for their service? Yes: \_\_\_\_ No: \_\_\_\_

**Instructions for Remains:** Please include a provision detailing your wishes with regards to either burial or cremation arrangements. If you have pre-arrangements in place, such as a specific funeral home, burial site or any other arrangements, please provide details below.

Burial: \_\_\_\_ Cremation: \_\_\_\_ Other: \_\_\_\_\_

Specific Instructions for Agent: \_\_\_\_\_

\_\_\_\_\_  
 \_\_\_\_\_

**DISPOSITION OF REMAINS**

Please choose an Agent to control the disposition of your remains (i.e. carry out your instructions and wishes with regard to funeral arrangements).

If you wish to appoint more agents, attach an additional sheet with the requested information.

Agent Full Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ ST: \_\_\_\_\_ Zip: \_\_\_\_\_

1<sup>st</sup> Alternate Agent: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ ST: \_\_\_\_\_ Zip: \_\_\_\_\_

2<sup>nd</sup> Alternate Agent: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ ST: \_\_\_\_\_ Zip: \_\_\_\_\_

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**STATUTORY DURABLE POWER OF ATTORNEY**

If you wish to appoint more agents, attach an additional sheet with the requested information.

Agent Full Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ ST: \_\_\_\_\_ Zip: \_\_\_\_\_

1<sup>st</sup> Alternate Agent Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ ST: \_\_\_\_\_ Zip: \_\_\_\_\_

2<sup>nd</sup> Alternate Agent Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ ST: \_\_\_\_\_ Zip: \_\_\_\_\_

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**MEDICAL POWER OF ATTORNEY**

If you wish to appoint more agents, attach an additional sheet with the requested information.

Agent Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ ST: \_\_\_\_\_ Zip: \_\_\_\_\_

1<sup>st</sup> Alternate Agent Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ ST: \_\_\_\_\_ Zip: \_\_\_\_\_

2<sup>nd</sup> Alternate Agent Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ ST: \_\_\_\_\_ Zip: \_\_\_\_\_

**GUARDIAN OF PERSON AND ESTATE**

In the event of later incapacity, we recommend that you designate a guardian for your person and a guardian for your estate. They can be the same person, but they do not have to be. We also recommend that you choose alternates for this position in case the person selected predeceases you or declines the appointment. If you wish to appoint more guardians, attach an additional sheet with the requested information.

Name of Guardian of Person: \_\_\_\_\_ Relationship: \_\_\_\_\_  
 Alternate Guardian of Person: \_\_\_\_\_ Relationship: \_\_\_\_\_  
 Name of Guardian of Estate: \_\_\_\_\_ Relationship: \_\_\_\_\_  
 Alternate Guardian of Estate: \_\_\_\_\_ Relationship: \_\_\_\_\_  
 Divorce Clause: Yes: \_\_\_\_\_ No: \_\_\_\_\_

**GUARDIAN FOR CHILD(REN) OF PERSON AND ESTATE**

In the event of you AND your spouse die or are later incapacitated, we recommend that you designate a guardian for child(ren) of person and estate. They can be the same person, but they do not have to be. We also recommend that you choose alternates for this position in case the person selected predeceases you or declines the appointment. (Applicable for children under the age of 18 years old.) If you wish to appoint more guardians, attach an additional sheet with the requested information.

Name of Guardian of Person: \_\_\_\_\_ Relationship: \_\_\_\_\_  
 1<sup>st</sup> Alternate Guardian of Person: \_\_\_\_\_ Relationship: \_\_\_\_\_  
 2<sup>nd</sup> Alternate Guardian of Person: \_\_\_\_\_ Relationship: \_\_\_\_\_  
 Name of Guardian of Estate: \_\_\_\_\_ Relationship: \_\_\_\_\_  
 1<sup>st</sup> Alternate Guardian of Estate: \_\_\_\_\_ Relationship: \_\_\_\_\_  
 2<sup>nd</sup> Alternate Guardian of Estate: \_\_\_\_\_ Relationship: \_\_\_\_\_  
 Do you want your children to have access to both sides of the family? Yes: \_\_\_\_\_ No: \_\_\_\_\_

**If there are any additional instructions, questions or comments regarding your Will or Estate package please feel free to use the space below:**

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

## INSTRUCTIONS AND EXPLANATIONS

### **What is a Testator/Testatrix?**

A Testator is the legal term for a person who makes a will.

### **What is an Executor?**

An Executor is the person that is appointed by the Testator to carry out the directions in the Testator's will. The Executor's duties include offering the Testator's will for probate, using the estate's funds to pay for funeral and burial expenses, distributing property to the beneficiaries named in the will, obtaining information about potential heirs, collecting and arranging for payment of debts of the estate, and approving or disapproving creditor claims. An Executor also makes sure estate taxes are paid, if required.

Not everyone may be suitable to serve as Executor of your will, so make your designation wisely. The best executors are people who are careful, patient, unquestionably honest, well-organized, and committed to doing a good job. An Executor should also get along with people well and have a good bit of spare time.

### **Why would an Executor receive compensation?**

The job of the Executor is not an easy one. It is a major obligation that may last for months, sometimes more. Depending on the complexity of the estate, an Executor's job oftentimes comes with long hours, stress, and dealing with family conflict and controversy. As compensation for their efforts, Texas law provides that Executors are entitled to a commission of five percent (5%) on all sums they actually receive in cash, and five percent (5%) on all sums they pay out in cash. In other words, the compensation will equal 5% of income (from estate sales, etc.) and 5% of the expenses (paying creditors, etc.) of the estate. For example, if the Executor conducts a sale of property of the estate, the Executor will collect 5% of the funds received from the sale. Of course, you, as the Testator, may decide whether to compensate your Executor or not. You may select the amount of compensation as well. If you

decide against compensating your Executor, you must indicate as such clearly in your will. Otherwise, the statutory 5% compensation will apply.

In some cases, compensating your Executor may not be necessary. For example, a spouse or child who is both an Executor and a beneficiary receiving all or most of the estate's assets does not necessarily need compensation. Compensation may be more appropriate in situations where the Executor is a non-family member, where there are multiple beneficiaries, or if a difficult administration of the estate is faced (i.e. many assets to be distributed, multiple creditors to be paid, complex estate taxes, etc.).

### **What is a power of attorney form?**

A power of attorney is a form that allows you to designate an agent, called an attorney-in-fact, who will have the authority to act on your behalf with respect to your financial affairs and property. The Power of Attorney can become effective upon your disability or incapacity, or at any time of your choosing.

### **What is a medical power of attorney form?**

A medical power of attorney form allows you to designate an agent that will have the authority to make a broad range of medical decisions concerning your health care, should you ever be deemed to lack the capacity to make these decisions for yourself in the future. Choosing a person to act as your health care agent is possibly the most important part of your planning. You must trust that the person you select as your Agent will have all of your best interests at heart, understands your wishes, and will act accordingly.

### **Why should you appoint a Guardian of your person and of your estate?**

Designating a Guardian in advance need is an essential part of a comprehensive estate plan. It is very important to nominate someone in advance to oversee your permanent care in the event that you become incapacitated in the future. There are

two kinds of guardianships in Texas: guardianship of the estate and guardianship of the person. A guardian of the estate is responsible for managing the property and financial affairs of the incapacitated person (the ward). A guardian of the person is generally responsible for providing care, supervision, food, clothing, and shelter for the ward. An individual may be appointed either guardian of the estate or guardian of the person, or both. As with your appointment of Executor, you should select someone that is trustworthy, well-organized, and committed to doing a good job.

### **Why should you appoint a Guardian for your minor child/children?**

Designating a guardian for your child/children in advance need will give you immense peace of mind knowing that your child/children will be taken care of by the person that you have thoughtfully selected. You may appoint a guardian of the person and a guardian of the estate for your child/children; the same person can be appointed to both positions.

Here are a few considerations when selecting a Guardian for your child/children:

- 1) the potential Guardian's parenting style, values, and religious beliefs;
- 2) whether your child already feels comfortable with the potential Guardian;
- 3) whether the potential guardian has enough time and energy to devote to the care of your child.

### **What is a "Directive to Physicians" (also called a Living Will or Advance Directive) and why is it important?**

A Directive to Physicians goes hand-in-hand with your Medical Power of Attorney. It is an advance directive that communicates your preferences regarding treatment to your doctors and to your family if you are faced with a devastating terminal illness or irreversible condition. The Directive to Physicians speaks for you when you are not able to speak for yourself, such as if you are in a coma. This directive allows you to instruct your doctor whether you want to be administered life-prolonging treatment, at what point you want

such treatment to be withdrawn, and in what circumstances you want life-prolonging treatment withheld. Living Wills and other advanced directives are not just for older adults. You may recall the 2005 Terri Schiavo controversy. 41-year-old Terri Schiavo suffered massive brain damage due to lack of oxygen after a cardiac arrest, leaving her in a vegetative state. Because Terri did not have advance directives in place to communicate her wishes, a major legal dispute ensued between Terri's husband and parents over the issue of whether Terri's doctors should continue to administer life-prolonging treatment. This legal struggle between Terri's husband and parents lasted for 15 years, concluding with the removal of Terri's feeding tube. If Terri's estate planning documents included a Living Will, 15 years of court proceedings, stress, and family feuding could have been avoided. As you can see, unexpected end-of-life situations can happen at any age, so it's important for all adults to have advance directives in place.

### **Why should you appoint an Agent to handle the disposition of your remains/funeral arrangements?**

You may appoint an Agent to carry out your wishes with regard to burial or cremation arrangements. You may also choose to include a provision in your Will detailing specific directives about funeral/cremation arrangements. Or, you may provide simple instructions in your Will, such as: "I direct that my funeral be performed at the church regularly attended by my family instead of the funeral home." Either way, appointing an Agent and having a clear plan in place will alleviate much stress for your family during this difficult time.