

# ESTATE ADMINISTRATION INSTRUCTIONS FORM

Prepared for (entity)

Services Agreement

or N/A

Preparation date

Prepared by

## Autonomy First Planning Guide

This form prepares us to deal with a range of considerations, including those overviewed below.

### WHO REPRESENTS YOU?

- During your life as:
  - attorney,
  - guardian, and
  - decision making supporter?
- After your death - as executor?
- Who are the backstop appointments to your primary representatives?
- Note we will need to formally identify all representatives and have verifiable descriptions of all beneficiaries. Formal visual identification procedures will be needed.

### WHAT WILL THEY HAVE TO MANAGE?

- What is your property?
- What rights do you have that may have value e.g. debts or family provision claim rights?
- What intention, causes or charities or other good do you want to do after you die?

### HOW WILL THEY MANAGE YOUR INTENTIONS?

- During your life
- After your death
  - By direct gifts?
  - Forgiving debt?
  - Some other means

### WHEN SHOULD THEIR ROLE COMMENCE?

- Your will can only take effect once you die.
- Your Enduring Guardianship will only commence when you lose some or all of your ability to make decisions about your health, wellness or living arrangements.
- Your Power of Attorney can take effect, now, or later and subject to a range of conditions. When do you think you may need help and why?

### WHAT ELSE DO WE NEED TO KNOW TO HELP YOU?

## People and Family

### Spouse 1

Title \_\_\_\_\_ Full name \_\_\_\_\_

Address \_\_\_\_\_

Home telephone \_\_\_\_\_ Mobile \_\_\_\_\_

Home fax \_\_\_\_\_ Email \_\_\_\_\_

Date of birth \_\_\_\_\_ Place of birth \_\_\_\_\_ Driver's licence no. \_\_\_\_\_

Occupation \_\_\_\_\_ Job title \_\_\_\_\_

Work telephone \_\_\_\_\_ Work fax \_\_\_\_\_

Citizenship \_\_\_\_\_ Residence \_\_\_\_\_

### Spouse 2

Title \_\_\_\_\_ Full name \_\_\_\_\_

Address \_\_\_\_\_

Home telephone \_\_\_\_\_ Mobile \_\_\_\_\_

Home fax \_\_\_\_\_ Email \_\_\_\_\_

Date of birth \_\_\_\_\_ Place of birth \_\_\_\_\_ Driver's licence no. \_\_\_\_\_

Occupation \_\_\_\_\_ Job title \_\_\_\_\_

Work telephone \_\_\_\_\_ Work fax \_\_\_\_\_

Citizenship \_\_\_\_\_ Residence \_\_\_\_\_

### Dependant(s)

|   | RELATIONSHIP TO CLIENT | NAME | SEX | DATE OF BIRTH |
|---|------------------------|------|-----|---------------|
| 1 |                        |      |     |               |
| 2 |                        |      |     |               |
| 3 |                        |      |     |               |
| 4 |                        |      |     |               |
| 5 |                        |      |     |               |
| 6 |                        |      |     |               |

**Representative(s)**

|   | TYPE – ATTORNEY ETC | NAME | ADDRESS |
|---|---------------------|------|---------|
| 1 |                     |      |         |
| 2 |                     |      |         |
| 3 |                     |      |         |
| 4 |                     |      |         |
| 5 |                     |      |         |
| 6 |                     |      |         |

**Other persons who may be interested in your estate**

| NAMES | DATES OF BIRTH |
|-------|----------------|
|       |                |
|       |                |
|       |                |
|       |                |

**Immediate family tree**

To enable us to get a picture of your family, please provide a tree.

**YOUR PARENTS AND PARENTS-IN-LAW**

|  |  |  |  |
|--|--|--|--|
|  |  |  |  |
|--|--|--|--|

**YOU/SPOUSE**

|  |  |
|--|--|
|  |  |
|--|--|

**YOUR CHILDREN**

| Names | Dates of birth |
|-------|----------------|
|       |                |

| YOUR GRANDCHILDREN |                |
|--------------------|----------------|
| Names              | Dates of birth |
|                    |                |
|                    |                |
|                    |                |
|                    |                |
|                    |                |
|                    |                |
|                    |                |
|                    |                |
|                    |                |

## Assets and Liabilities

### Assets – copy and repeat for Non Australian jurisdictions

| Located in Australia | Sole ownership | Jointly held property |                   | External structures |                |                  |
|----------------------|----------------|-----------------------|-------------------|---------------------|----------------|------------------|
|                      |                | JOINT TENANCY         | TENANCY IN COMMON | TRUST ASSETS        | COMPANY ASSETS | OTHER STRUCTURES |
| Cash                 |                |                       |                   |                     |                |                  |
| Bank accounts        |                |                       |                   |                     |                |                  |
|                      |                |                       |                   |                     |                |                  |
| Accrued wages        |                |                       |                   |                     |                |                  |
| Other entitlements   |                |                       |                   |                     |                |                  |
| Taxation credits     |                |                       |                   |                     |                |                  |
| Home                 |                |                       |                   |                     |                |                  |
| Other real estate    |                |                       |                   |                     |                |                  |
|                      |                |                       |                   |                     |                |                  |
|                      |                |                       |                   |                     |                |                  |
| Bonds                |                |                       |                   |                     |                |                  |

|  |  |  |  |  |  |  |
|--|--|--|--|--|--|--|
| Shares                                 |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
| Debentures                             |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
| Personal property<br>Listed & unlisted |  |  |  |  |  |  |
| Loans -<br>Secured and<br>unsecured    |  |  |  |  |  |  |
| Life insurance *                       |  |  |  |  |  |  |
| Superannuation *                       |  |  |  |  |  |  |
| Business interest                      |  |  |  |  |  |  |
| Annuity                                |  |  |  |  |  |  |

\* For further issues on superannuation see page 10 of this fact finder. These questions should be reviewed for appropriateness to your circumstances.

| <b>Liabilities</b> |                       |                                     |                   |                            |                  |
|--------------------|-----------------------|-------------------------------------|-------------------|----------------------------|------------------|
|                    | <b>Sole ownership</b> | <b>Jointly incurred liabilities</b> |                   | <b>External structures</b> |                  |
|                    |                       | JOINT TENANCY                       | TENANCY IN COMMON | COMPANY ASSETS             | OTHER STRUCTURES |
| Mortgage 1         |                       |                                     |                   |                            |                  |
| Mortgage 2         |                       |                                     |                   |                            |                  |
| Mortgage 3         |                       |                                     |                   |                            |                  |
| Consumer debts     |                       |                                     |                   |                            |                  |
| Medical expenses   |                       |                                     |                   |                            |                  |
| Tax                |                       |                                     |                   |                            |                  |
| Domestic accounts  |                       |                                     |                   |                            |                  |
| Guarantees         |                       |                                     |                   |                            |                  |
|                    |                       |                                     |                   |                            |                  |
| Sureties           |                       |                                     |                   |                            |                  |
|                    |                       |                                     |                   |                            |                  |
| Loans              |                       |                                     |                   |                            |                  |
|                    |                       |                                     |                   |                            |                  |
| Other              |                       |                                     |                   |                            |                  |
|                    |                       |                                     |                   |                            |                  |

|  |  |  |  |  |  |
|--|--|--|--|--|--|
|  |  |  |  |  |  |
|  |  |  |  |  |  |

**List collectables, offshore & substantial non-investment assets**

| DESCRIPTION | LOCATION | VALUE | DATE ACQUIRED |
|-------------|----------|-------|---------------|
|             |          |       |               |
|             |          |       |               |
|             |          |       |               |
|             |          |       |               |
|             |          |       |               |
|             |          |       |               |
|             |          |       |               |
|             |          |       |               |
|             |          |       |               |
|             |          |       |               |

Do you have inheritances which may come to you from Australia or other sources? Yes  No

Are you the trustee, agent or representative of another person Yes  No

Does anyone in your family live in a country other than Australia Yes  No

Do you hold dual citizenship? Yes  No

If yes, where? \_\_\_\_\_

## Annual Income Stream Assessment

### Income

| CLIENT                               |          | SPOUSE                |          |
|--------------------------------------|----------|-----------------------|----------|
| Salary/wages                         | \$ _____ | Salary/wages          | \$ _____ |
| Car allowance                        | \$ _____ | Car allowance         | \$ _____ |
| Other fringe benefits                | \$ _____ | Other fringe benefits | \$ _____ |
| Non salary allowances                | \$ _____ | Non salary allowances | \$ _____ |
| Rental income                        | \$ _____ | Rental income         | \$ _____ |
| Investment income                    | \$ _____ | Investment income     | \$ _____ |
| Bank account income                  | \$ _____ | Bank account income   | \$ _____ |
| Other _____                          | \$ _____ | Other _____           | \$ _____ |
| Other _____                          | \$ _____ | Other _____           | \$ _____ |
| Total taxable income                 | \$ _____ | Total taxable income  | \$ _____ |
| Tax liability                        | \$ _____ | Tax liability         | \$ _____ |
| Net annual income                    | \$ _____ | Net annual income     | \$ _____ |
| <b>A. Combined net annual income</b> |          | <b>\$</b>             | _____    |

### Core Family Expenditure

| TYPE OF EXPENSE                               | ANNUAL COST |
|---|-------------|
| Mortgage/rent on principal residence          | \$ _____    |
| Investment loans                              | \$ _____    |
| Investment costs – repairs, advice, fees, etc | \$ _____    |
| Other loans                                   | \$ _____    |
| Credit and store card repayments              | \$ _____    |
| Tax (other than PAYE)                         | \$ _____    |
| General household expenses                    | \$ _____    |
| Electricity/Gas/Water                         | \$ _____    |
| Telephones                                    | \$ _____    |
| Insurance – Life                              | \$ _____    |
| Insurance – General                           | \$ _____    |

|                     |       |    |
|---------------------|-------|----|
|                     | _____ | \$ |
| Insurance – Medical | _____ | \$ |
| Education           | _____ | \$ |
| Entertainment       | _____ | \$ |
| General spending    | _____ | \$ |
| Other               | _____ | \$ |
|                     | _____ | \$ |

**B. Total expenditure**

|   |          |          |
|---|----------|----------|
|   | _____    | \$       |
| Net Cashflow (A-B)                      | _____    | \$       |
| less Superannuation contributions       | \$ _____ | _____    |
| less Charitable gift deductions         | \$ _____ | \$ _____ |
| <b>"Fun money"</b> (surplus/deficiency) |          | \$ _____ |



## Current Insurance Cover and Superannuation

### Personal insurance

| POLICY OWNER | TYPE OF INSURANCE | INSTITUTION | BENEFIT | VALUE (IF ANY) | PREMIUM PER ANNUM |
|--------------|-------------------|-------------|---------|----------------|-------------------|
|              |                   |             | \$      | \$             | \$                |
|              |                   |             | \$      | \$             | \$                |
| <b>Total</b> |                   |             |         |                | <b>\$</b>         |

### General insurance

| POLICY TYPE           | INSTITUTION | COVER | EXCESS | RENEWAL DATE | PREMIUM PER ANNUM |
|-----------------------|-------------|-------|--------|--------------|-------------------|
| Home/Contents         |             | \$    | \$     |              | \$                |
| Investment property 1 |             | \$    | \$     |              | \$                |
| Investment property 2 |             | \$    | \$     |              | \$                |
| Car                   |             | \$    | \$     |              | \$                |
| POLICY TYPE           | INSTITUTION | COVER | EXCESS | RENEWAL DATE | PREMIUM PER ANNUM |
| Other                 |             | \$    | \$     |              | \$                |
|                       |             | \$    | \$     |              | \$                |
|                       |             | \$    | \$     |              | \$                |
| <b>Total</b>          |             |       |        |              | <b>\$</b>         |

### Private health insurance

| COMPANY      | PERSON(S) COVERED | TYPE OF COVER | PREMIUM   |
|--------------|-------------------|---------------|-----------|
|              |                   |               | \$        |
|              |                   |               | \$        |
| <b>Total</b> |                   |               | <b>\$</b> |

Transfer summary to page 8 as needed.

### Superannuation

| COMPANY      | TYPE* | NOMINATED BENEFICIARY | VALUE     |
|--------------|-------|-----------------------|-----------|
|              |       |                       | \$        |
|              |       |                       | \$        |
| <b>Total</b> |       |                       | <b>\$</b> |

\* DIY – Do it yourself fund  
 PO – Public offer/employer fund

**Do you have a binding nomination in place?** Yes  No   
 (Attach copy of nomination) If yes, date \_\_\_\_\_

**Have you used your Transfer Balance Cap ?** Yes  No   
 If yes, please attach evidence Amount \$ \_\_\_\_\_

**SMSF fund** Yes  No   
 (Attach copy of deed)  
 If yes, date fund commenced \_\_\_\_\_  
 If yes, has the deed been amended since inception? Yes  No   
 If yes, dates amended \_\_\_\_\_  
 How many members in fund? \_\_\_\_\_

**Types of benefits authorised by deed**

Lump sum Yes  No

Reversionary pension Yes  No

Complying lifetime pension Yes  No

Life expectancy pension Yes  No

Can you defer payment until 65 or 75 or beyond? Yes  No

Are you currently in receipt of an allocated pension? Yes  No

If yes, please provide details:  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

| <b>Insurance cover calculation sheet</b>       |                 | Capital requirement |
|--|-----------------|---------------------|
|  |                 | \$ _____            |
| Mortgage                                       | \$ _____        |                     |
| Education fund                                 | \$ _____        |                     |
| Taxation                                       | \$ _____        |                     |
| Amount due on death                            | \$ _____        |                     |
| Capital to top up<br>requirement capital needs | \$ _____        |                     |
| <b>Total</b>                                   | <b>\$ _____</b> |                     |

LESS – existing:

|                             |           |       |
|-----------------------------|-----------|-------|
| Superannuation              | \$        | _____ |
| Life insurance              | \$        | _____ |
| Sickness and accident cover | \$        | _____ |
| <b>Total</b>                | <b>\$</b> | _____ |

Excess  Deficiency

## Will Instructions

Also consider medical decision making, powers of attorney, power of guardianship and advanced care directive.

### 1 Who do wish to appoint as the executor of your estate?

1.1 PRIMARY

(a) Primary 1

(b) Primary 2

1.2 SUBSTITUTE

(a) Substitute 1

(b) Substitute 2

### 2 Specific bequests

(a) within will:

(b) by Memorandum of Wishes:

### 3 Residuary bequests

(a) to spouse/partner/other then if spouse/partner/other has predeceased,

(b) to surviving children, if none then,

(c) to surviving grandchildren, if none then,

(d) final gift over:

(i) Scenario:

(1) my family, or

(2) spouse/partner/other's family, or

(ii) charity.

### 4 General powers given to a trustee

(a) Vesting Dates:

(i) income (eg at 18 years of age), and

(ii) capital (eg at 21, 25, 30 etc years of age)

(b) Power to maintain infant beneficiaries

- (c) Power to invest
- (d) Power to borrow (particularly relevant if there are infant beneficiaries)
- (e) Power to partition, appropriate and postpone sale
- (f) Negate section 144 *Conveyancing Act*  
(To assist in apportionment of income streams after death of testator or life tenant.)
- (g) Power to carry on business (relevant if you are the proprietor of a business)
- (h) CGT and GST charging clause

**5 Testamentary guardians in the event of infant children?**

**6 Funeral arrangements - any particular requests?**

**7 Have you appointed a professional person to act as your executor (eg accountant, solicitor?) If so note here what needs to be considered.**

- (a) charging provisions,
- (b) nomination of representation, or
- (c) review of executors commission rights.

**8 Other clauses and provisions which may be need to be considered in your will**

8.1 ASSETS

**Collectables** are those assets that are used mainly for your personal use or enjoyment which have an acquisition cost excess of \$500.00 and which fall within a list which includes, artwork, jewellery, an antique or a coin or medallion, a rare folio, manuscript or book, a postage stamp or first day cover.

**Personal use assets** are those personal use assets which are used or kept mainly for your personal use or enjoyment and include furniture, household appliances, boats used for pleasure, sporting equipment which have an acquisition cost in excess of \$10,000.

8.2 LIABILITIES

Dealing with external structures:

- (a) companies,
- (b) trusts,
- (c) superannuation, and
- (d) life insurance.

Are there any guarantees or sureties or like obligations surviving death?

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Are there contractual liabilities which will survive death  
eg commercial or professional risk?

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What is the contemplated time scale for administration  
of the estate? ie How long lived are the provisions of  
the testamentary estate intended to be?

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See the following strategic accountabilities diagram for  
more information: