

ESTATE AND TRUST ADMINISTRATION INTAKE FORM

PART 1. GENERAL INFORMATION ON DECEDENT

- 1.1 Name of Decedent _____
- 1.2 Legal Address at time of death (include county) _____

- 1.3 Date of Death _____ (Attach 3 original death certificates)
- 1.4 Date of Birth _____.
- 1.5 Year domicile established _____.
- 1.6 Social Security Number _____.
- 1.8 Decedents business or occupation. Check ____ Yes if retired, and state decedent's former business or occupation. _____
- 1.9 Marital status of Decedent at the time of death. _____. If decedent was a widow or widower, provide name, SSN and date of death of deceased spouse. _____

- 1.10. United States Citizen ____ Yes ____ No. If NO what country _____

PART 2. NAME OF HEIRS AT LAW AND INDIVIDUALS AND CHARITIES NAMED IN WILL OR TRUST.

2.1 List all heirs at law and all individuals and charities named in the decedent's Will or Trust. If a heir at law or beneficiary predeceased the decedent, list the deceased individual's name, date of death, and the name and addresses of his or her family members. If more space is needed, attach additional sheets to this form.

Beneficiary 1.

Name _____

Address: _____

Phone No. _____

Social Security Number _____

Date of Birth (for minors only) _____ (include name and address of parent or guardian of minor. _____

Relationship to Decedent _____

If beneficiary predeceased the decedent, provide name and date of death of the predeceased beneficiary, and the name and address of his or her family members. Please note if any family members are minors.

Beneficiary 2.

Name _____
Address _____
Phone No. _____
Social Security Number _____ (only for individuals named in Will or Trust Document)
Date of Birth (for minors only) _____ (include name and address of parent or guardian of minor. _____

Relationship to Decedent _____

If beneficiary predeceased the decedent, provide name and date of death of the predeceased beneficiary, and the name and address of his or her family members. Please note if any family members are minors.

Beneficiary 3.

Name _____
Address _____
Phone No. _____
Social Security Number _____ (only for individuals named in Will or Trust Document)
Date of Birth (for minors only) _____ (include name and address of parent or guardian of minor. _____

Relationship to Decedent _____

If beneficiary predeceased the decedent, provide name and date of death of the predeceased beneficiary, and the name and address of his or her family members. Please note if any family members are minors.

Beneficiary 4.

Name _____
Address _____
Phone No. _____
Social Security Number _____ (only for individuals named in Will or Trust Document)
Date of Birth (for minors only) _____ (include name and address of parent or guardian of minor. _____

Relationship to Decedent _____

If beneficiary predeceased the decedent, provide name and date of death of the predeceased beneficiary, and the name and address of his or her family members. Please note if any family members are minors.

Beneficiary 5.

Name. _____

Address _____

Phone No. _____

Social Security Number _____ (only for individuals named in Will or Trust Document)

Date of Birth (for minors only) _____ (include name and address of parent or guardian of minor. _____)

Relationship to Decedent _____

If beneficiary predeceased the decedent, provide name and date of death of the predeceased beneficiary, and the name and address of his or her family members. Please note if any family members are minors.

Beneficiary 6.

Name _____

Address _____

Phone No. _____

Social Security Number _____ (only for individuals named in Will or Trust Document)

Date of Birth (for minors only) _____ (include name and address of parent or guardian of minor. _____)

Relationship to Decedent _____

If beneficiary predeceased the decedent, provide name and date of death of the predeceased beneficiary, and the name and address of his or her family members. Please note if any family members are minors.

Beneficiary 7.

Name _____

Address _____

Phone No. _____

Social Security Number _____ (only for individuals named in Will or Trust Document)

Date of Birth (for minors only) _____ (include name and address of parent or guardian of minor. _____)

Relationship to Decedent _____

If beneficiary predeceased the decedent, provide name and date of death of the predeceased beneficiary, and the name and address of his or her family members. Please note if any family members are minors.

Beneficiary 8.

Name _____

Address _____

Phone No. _____

Social Security Number _____ (only for individuals named in Will or Trust Document)

Date of Birth (for minors only) _____ (include name and address of parent or guardian of minor. _____)

Relationship to Decedent _____

If beneficiary predeceased the decedent, provide name and date of death of the predeceased beneficiary, and the name and address of his or her family members. Please note if any family members are minors.

Beneficiary 9.

Name _____

Address _____

Phone No. _____

Social Security Number _____ (only for individuals named in Will or Trust Document)

Date of Birth (for minors only) _____ (include name and address of parent or guardian of minor. _____)

Relationship to Decedent _____

If beneficiary predeceased the decedent, provide name and date of death of the predeceased beneficiary, and the name and address of his or her family members. Please note if any family members are minors.

Beneficiary 10.

Name _____

Address _____

Phone No. _____

Social Security Number _____ (only for individuals named in Will or Trust Document)

Date of Birth (for minors only) _____ (include name and address of parent or guardian of minor. _____)

Relationship to Decedent _____

If beneficiary predeceased the decedent, provide name and date of death of the predeceased beneficiary, and the name and address of his or her family members. Please note if any family members are minors.

PART 3 NAME OF TRUSTEE, PERSONAL REPRESENTATIVE OR OTHER FIDUCIARY.

3.1 Name of Trustee _____

3.2. Address of Trustee (include telephone number) _____

_____.

3.3. Social Security Number of Trustee (if an individual). _____

3.4. Name, address and Social Security Number of Personal Representative (if different than Trustee) _____

_____.

3.5. Name of Successor Trustee _____

3.6. Address of Successor Trustee (include telephone number) _____

_____.

3.7. Social Security Number of Successor Trustee (if individual). _____

PART 4. GENERAL QUESTIONS.

4.1.1 Have Federal Gift Tax Returns ever been filed? ____ Yes ____ No. If Yes, attach copies of all gift tax returns.

4.2 Did the decedent make any taxable gifts that were not reported on a gift tax return? ____ Yes ____ No. If yes, provide date of the gift, type of property given (cash, real property, ect.) amount of gift, and the name(s) and address of the donee(s).

4.3 Did the decedent receive by gift (other from spouse) any property within one year prior to the decedent's date of death? ____ Yes ____ No. If Yes, provide description of property, date of gift and the name and address of the person who gave the decedent the property.

- 4.4 Did the decedent, at any time, transfer property reserving in whole or in part, the use, possession, income or enjoyment of such property? ____ Yes ____ No. If Yes, attach a description of such reservation.
- 4.4. Provide originals of all Trust Agreements and amendments signed by the decedent.
- 4.5 Provide the decedent's original Last Will and Testament and original Codicils.
- 4.6 Did the decedent complete a personal property memorandum or gift list? ____ Yes ____ No. If Yes, attach copy of memorandum or gift list.
- 4.7 Did the decedent, at the time of death, own any interest in a partnership, limited liability company, or closely-held corporation? ____ Yes ____ No. If Yes, attach copies of organizational and operating documents, certificates, buy/sell agreements and income tax returns for entity.
- 4.8 If the decedent's spouse predeceased the decedent, attach copies of the predeceased spouse's trust agreements, last will and testament, estate tax return (if no estate tax return was filed attach probate inventory)
- 4.9 Where there in existence at the time of the decedent's death any trusts not created by the decedent under which the decedent possessed any power, beneficial interest or trusteeship? ____ Yes ____ No. If Yes, attach copies of trust agreement along with inventory of trust assets.
- 4.10 Did the decedent execute a prenuptial or post nuptial agreement? ____ Yes ____ No _____. If Yes, attach a copy of the agreement.
- 4.11 Did the decedent at the time of death have, or have access to a safe deposit box? ____ Yes ____ No. If Yes, provide location and if held in joint names of the decedent and another, state name and relationship of joint depositor, and describe contents of safe deposit box.

PART 5. REAL ESTATE.

- 5.1 Did the decedent own any real property at the time of death? ____ Yes ____ No. If Yes, list each property owned by the decedent and attached a copy of the last deed of record. Indicate the last use of the property by the decedent (principal residence, farm land, rental, vacation home). If available, provide the date the decedent purchased the property and the amount of the purchase price. If more space is needed, attach additional sheets to this form. Indicate if you plan to sell any of the listed property during the period of administration.

Property 1.

If Yes, provide the following information for each property owned by the decedent:

- (a) Copy of last deed.
- (b) If property is leased, provide copy of current lease agreement and the amount of any unpaid rent as of the decedent's date of death.
- (c) Attach the last property tax statement.
- (d) The amount the property was insured for. _____
- (e) Last Use of the Property: _____
- (f) Does property have any environmental concerns; ___ Yes ___ No.
- (g) Address of property: _____
- (h) Date the decedent acquired the property. _____. How did decedent acquire the property (purchase, gift, inherited, like-kind exchange, ect.) _____. If purchased, provide the amount of purchase price. _____. If the property was acquired by gift, inheritance or by a like-kind exchange, provide the decedent's tax basis _____.

Property 2.

If Yes, provide the following information for each property owned by the decedent:

- (i) Copy of last deed.
- (j) If property is leased, provide copy of current lease agreement and the amount of any unpaid rent as of the decedent's date of death.
- (k) Attach the last property tax statement.
- (l) The amount the property was insured for. _____
- (m) Last Use of the Property: _____
- (n) Does property have any environmental concerns; ___ Yes ___ No.
- (o) Address of property: _____
- (p) Date the decedent acquired the property. _____. How did decedent acquire the property (purchase, gift, inherited, like-kind exchange, ect.) _____. If purchased, provide the amount of purchase price. _____. If the property was acquired by gift, inheritance or by a like-kind exchange, provide the decedent's tax basis _____.

Property 3.

If Yes, provide the following information for each property owned by the decedent:

- (a) Copy of last deed.
- (b) If property is leased, provide copy of current lease agreement and the amount of any unpaid rent as of the decedent's date of death.
- (c) Attach the last property tax statement.
- (d) The amount the property was insured for. _____

- (e) Last Use of the Property: _____
- (f) Does property have any environmental concerns; ___ Yes ___ No.
- (g) Address of property: _____
- (h) Date the decedent acquired the property. _____. How did decedent acquire the property (purchase, gift, inherited, like-kind exchange, ect.) _____. If purchased, provide the amount of purchase price. _____. If the property was acquired by gift, inheritance or by a like-kind exchange, provide the decedent's tax basis _____.

Property 4.

If Yes, provide the following information for each property owned by the decedent:

- (a) Copy of last deed.
- (b) If property is leased, provide copy of current lease agreement and the amount of any unpaid rent as of the decedent's date of death.
- (c) Attach the last property tax statement.
- (d) The amount the property was insured for. _____
- (e) Last Use of the Property: _____
- (f) Does property have any environmental concerns; ___ Yes ___ No.
- (g) Address of property: _____
- (h) Date the decedent acquired the property. _____. How did decedent acquire the property (purchase, gift, inherited, like-kind exchange, ect.) _____. If purchased, provide the amount of purchase price. _____. If the property was acquired by gift, inheritance or by a like-kind exchange, provide the decedent's tax basis _____.

Property 5.

If Yes, provide the following information for each property owned by the decedent:

- (a) Copy of last deed.
- (b) If property is leased, provide copy of current lease agreement and the amount of any unpaid rent as of the decedent's date of death.
- (c) Attach the last property tax statement.
- (d) The amount the property was insured for. _____
- (e) Last Use of the Property: _____
- (f) Does property have any environmental concerns; ___ Yes ___ No.
- (g) Address of property: _____
- (h) Date the decedent acquired the property. _____. How did decedent acquire the property (purchase, gift, inherited, like-kind exchange, ect.) _____. If purchased, provide the amount of purchase price. _____. If the property was acquired by gift, inheritance or by a like-kind exchange, provide the decedent's tax basis _____.

PART 6 OIL AND GAS, MINERAL RIGHTS

6.1 List any mineral rights, oil and gas interests, water rights owned by the decedent as of the date of death. Include the legal description of the property and amount of annual royalty or rental payments. Attach copy of oil and gas lease or deed that created the mineral or water right.

PART 7. STOCKS AND BONDS

7.1 List all stocks, bonds, mutual funds, and other securities owned by the decedent as of the date of death. Provide copies of each stock certificate and copies of each bond owned by the decedent. Provide copies of all brokerage statements or mutual fund statements for the month of death and one month before and after the month of death. _____

PART 8. MORTGAGES, NOTES AND CASH.

8.1. List all financial institutions where the decedent maintained accounts, including, checking, savings, money market accounts and certificates of deposits. For each account, attach bank statements for the month prior to date of death, the month of the date of death and the month after the date of death. _____

8.2 If the decedent loaned money to another person or sold property on contract (do not include notes or amounts payable by the decedent), attach copies of all contracts or promissory notes that evidences the debt, copies of the mortgage or deed of trust that secures the note, copies of the amortization schedule (that reflect the unpaid balance), and a statement showing all past payments made on the note or contract. If the loan was not evidenced by a written promissory note, provide original amount of loan, interest rate, unpaid balance as of the date of death and the date of maturity. _____

8.3 List the amount of cash, if any, the decedent had in his/her possession as of the date of death. Indicate where cash was located. _____

8.4 List any contracts (or options) signed by the decedent to sell land or other property. Provide copies of all contracts. _____

PART 9. LIFE INSURANCE.

9.1 List all insurance policies that the decedent possessed any incidents of ownership. Include the name of the insurance company, policy number, the amount of death benefit, and the name of the beneficiary. Include a copy of the life insurance check, if already received, and Form 712, if available. _____

PART 10. JOINTLY OWNED PROPERTY.

10.1 If the decedent owned property with another person(s) as joint tenants (other than surviving spouse), identify the account owned in joint tenancy and provide the name, address of each surviving co-tenant. _____

10.2 If the decedent contributed less than 100% to the property owned in joint tenancy with someone other than the surviving spouse, identify the account and indicate the amount of the decedent's contribution. _____

PART 11. MISCELLANEOUS PROPERTY.

11.1 Did the decedent at the time of death own any articles of artistic or collectible value in excess of \$3,000, or any collections whose artistic or collectible valued combined at the date of death exceeded \$10,000. ____ Yes ____ No. If Yes, provide a complete description of collection, the amount the collection is insured for, and last appraisal. _____

Will the decedent, the decedent's spouse, or any other person receive (or will receive) an award, compensation, or bonus or other payment as a result of the decedent's employment or death. ____ Yes ____ No. If Yes, provide amount of such award, compensation, bonus or other payment and to who paid. _____

11.3 List the year, make, model and VIN of all automobiles, boats, airplanes, or other vehicles owned by the decedent. Include copies of titles and approximate value.

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PART 15. FUNERAL EXPENSES, DEBTS OF THE DECEDENT, MORTGAGES, EXPENSES AND LIENS.

15.1 List all funeral expenses and attach copies of canceled checks or invoices. _____

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15.2 Do you plan to take a fee for serving as Trustee (Personal Representative)? ____
Yes ___ No. If Yes, indicate if you plan to base your fee on an hourly charge, a percentage of
the estate, or a fee schedule. Indicate the amount of your hourly charge, the percentage or attach
a _____ copy _____ of _____ the _____ fee
schedule. _____

15.3 List all creditors of the decedent, and provide name and address of the creditor,
and the amount of claim. Indicate if the amount of the claim may be disputed or if the claim is
based upon past services or is being made by a beneficiary named under the will or trust, a
family _____ member _____ or _____ companion.

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15.4 List all debts owed by the decedent as of the date of death such as unpaid medical
expenses, credit card bills, mortgages and other monthly obligations. Provide the name and
address of the creditor, the outstanding balance due and if the debt is secured by property, the
legal description of the property. Indicate if the amount of the debt is in dispute.

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Part 16. MISCELLANEOUS

Do you have any other legal issues which I should be aware of? ___ Yes, No ___. If yes, please explain

PART 17. OTHER ATTACHMENTS

17.1 If the value of the decedent's estate is more than \$1,000,000.00, provide the decedent's last three years bank statements with canceled checks and deposits.

17.2 Attach copies of the decedent's last three years income tax returns.

PART 18, ACCOUNTANT, FINANCIAL ADVISOR.

18.1 Name _____ of
CPA: _____

Company: _____

Address: _____

Telephone: _____

Fax: _____

18.2 Name _____ of _____ Financial
Advisor: _____

Company: _____

Address: _____

Telephone:

Fax:

PART 19. REFERRAL

By Whom Were You Referred To This Office?

Name _____

Street
Address _____

City _____ State _____

Zip _____

PART 20. CERTIFICATION

The undersigned hereby represents to the LAW OFFICES OF BRADLEY J. FRIGON, and each of its attorneys that the information contained in this intake form is accurate and complete, and that the undersigned understands that the law firm and its individual lawyers will rely on this information. I understand that if the information contained herein is inaccurate or incomplete, the recommendations made by the law firm may not be appropriate.

Signature of Client:
