Life Planning – Useful Information Form

Personal information

This is not a will. It does not deal with what should happen to your property or savings.

We would always advise you to make a will, otherwise your possessions will be distributed according to legal regulations rather than your own wishes.

You only need to fill in the bits that cover what you have. After filling it in, store it in a safe and secure place. Let a person you trust know because it will contain confidential details that could help people access your property.

My name				
My address				
Postcode	Tel No			
Occupation				
Date of Birth	Place of Birth			
Name of spouse/late spouse/partner (delete whichever does not apply)				
Where to fir	nd my Will			
If you don't have a Will, contact your solicitor for help				
The location o	f my Will is			
The date of m	y latest Will is			
Medical info	ormation			
My NHS numb	per is			
The location o	f my medical card is			

Doctor's name					
Doctor's addre	ss				
Postcode _	Tel No				
People to contact following my death					
Relatives and friends					
Name					
Address					
Postcode	Tel No				
Name					
Address					
Postcode	Tel No				
Name					
Address					
Postcode	Tel No				
My Solicitor					
Company name	e				
Address					
Postcode	Tel No				

Registrar of Births, Marriage and Deaths Address _____ Tel No _____ Postcode Note: Ask for two copies of the Death Certificate in order to claim assets. A death may be registered at any local registration office, but this may delay things as the papers will need to be sent to the area in which the death occurred. **Financial contacts Bank** Name and address of bank Tel No Postcode Accountant Person to contact Name and address of company _____ Tel No _____ Postcode **Tax Advisor** Person to contact Name and address of company

_____Tel No _____

Postcode

Insurance companies/broker

Type of insurance policy					
Name and address of company					
Postcode Tel No					
Type of insurance policy					
Name and address of company					
Postcode Tel No					
Make the relevant claims resulting from any insurance policies held.					
Inform the Inspector of Taxes					
Address					
Postcode Reference No					
Inform Social Security Office (for example, Pension Service)					
Address					
Postcode Reference No					

Check if dependants are entitled to any benefits.

If necessary, notify the suppliers).	following companies (for example, gas, electricity, water and telephone
Name and Tel No	
Name and Tel No	
Name and Tel No	
Council tax/rent de	partments
	act (for example, newsagent, milkman)
· ·	member this is not a will – do not leave instructions on this form about one with your money and possessions.)
Where to find thing	gs
House keys (including s	spare sets)
Birth Certificate	Marriage Certificate
Passport/identity cards	3
Insurance policies	
Stocks/shares certificat	res

Deeds of house	
Lease of property	
Bank/Building society/PO savi	ngs books
Rent Book _	
Bank/Credit cards _	
Premium Bond certificates _	
Pension documents	
Income tax papers	
Car keys	
Log book and insurance certifi	cates
Computer details (for example	e, password, email addresses, company support desk)
Mobile phone details (for exar	mple, supplier, contract, number)
Where to find my debts	
Loans	
Mortgages	
Hire purchase agreements	
Credit agreements	
Other liabilities	

Further information

Please use this space to continue entries from earlier sections, or to provide information not previously covered.					