

LETTERS OF ADMINISTRATION WITH WILL ANNEXED APPLICATION FORM

SECTION A ; YOUR DETAILS	
Title:	Mr ()
Forename:	
Last Name:	
Email:	
Daytime Telephone No.	
Address	
Postcode:	
Occupation:	
Marital Status:	Married ()
Are you related to the deceased?	Yes () No ()

If Yes, how are you related?	
------------------------------	--

"PLEASE NOTE: This form has been prepared by Busbys Solicitors of The Strand, Bude, Cornwall. EX23 8TJ. If you complete and submit this form to us, you are deemed to accept that our firm is entitled to charge £350 plus VAT and disbursements, for preparing the Inland Revenue form and Oath to lead to the Grant. In the circumstances, please read our Terms of Business as set out in our firm's website at www.busbyslaw.co.uk, before you complete this form and submit it to us."

We do appreciate that you may not have the information to hand to answer every question. Please answer as many questions as you can, and then print out the pages containing the outstanding questions.

Do save this form before closing so that you do not lose your data. (To save, click on File, Save as. Do make a note of where you have saved the Form as you will need to open it to finish completing it)

If there are any other applicants please give their details as shown above	
SECTION B - DETAILS OF THE DECEASED	
Last Name:	
Forename:	
Did the Deceased use any other name :	Yes () No ()
Were assets held in this name:	Yes () No ()
If Yes, please give details:	
And in what name(s) are they held?	
Please give the Deceased's National Insurance Number (or leave blank if not known)	
Address of the Deceased	
County:	
Postcode:	
Was the Deceased domiciled in England and Wales:	Yes () No ()
Was the Deceased retired at the date of their death:	Yes () No ()
If No, please state occupation of the deceased at time of death or state No occupation if applicable	

Date of Death:	() () ()
Date of Birth:	() () ()

Legal marital status of the Deceased and dates where applicable	() Bachelor () Spinster () Widowed () Married/Civil Partnership () () () Divorced () () () Legally separated () ()
To whom was the deceased married?	
Court where the deceased divorced/legally separated.	
Please give details of the deceased's tax district or income tax reference number if known	
Deceased's living relatives –please list the surviving relatives. Please provide us with dates of birth for all minor children (i.e. children under the age of 18 years). Can all of the deceased's living relatives be contacted? Please give addresses for all living relatives.	Yes () No ()

SECTION C – THE WILL	
Did the deceased leave a Will	Yes () No () If the answer to this question is NO, then please use Letters of Administration Form
Did the deceased leave any Codicils to their Will:	Yes () No ()
Is there anyone under 18 years old who receives a gift in the Will:	Yes () No ()
Are there any Executors named in the Will	Yes () No ()

Are you named as an Executor in the Will:	Yes () No ()
Is anyone else named an Executor in the Will:	Yes () No ()
Give the names and addresses of those Executors who are not applying for Probate and the reason why.	

--	--

Please confirm that the Deceased and their spouse or civil partner did not die together in an accident.	Yes () No ()
---	----------------

--	--

SECTION D – ASSETS ie Details of what the deceased owned at the date of his or her death: Please give details of the name of the Investment Company and the amount held in the investment (in sterling) on the day the deceased died.

Assets in the United Kingdom except for joint assets passing automatically to the surviving owner.

Total Cash (found on the deceased or in the deceased's home).	£
Total monies held in Bank Accounts	£
Total monies held in Building Societies, Cooperative or Friendly Societies or Saving Banks including interest to the date of death.	£
Total approximate value of Household and personal goods.	£
Total of Saving Certificates and other National Savings Investments.	£

Stock and Shares quoted on the Stock Exchange.	£
Stock and Shares not quoted on the Stock Exchange.	£
Total of ISAs and PEPs held	£
Insurance Policies including bonuses on "With Profits" Policies and Mortgage Protection Policies.	£
Amounts which employers owe including arrears of salary and pension payable to the estate.	£
Partnership and business interest	£

Freehold and leasehold residential property in the sole name of the deceased. Please note that you do not need a professional valuation but you must take reasonable steps to insert a realistic value e.g look in local estate agents windows or local newspapers for the values of comparable properties. Other freehold or leasehold residential property in the sole name of the deceased	£
The total value of assets owned with any other person or persons	£
Value of the deceased's share in any jointly owned assets	£
Please give details of the asset or assets jointly owned or with whom the asset is owned.	£
Assets outside the United Kingdom (value in sterling)	£

Any other assets of the deceased not already mentioned	£
--	---

SECTION E – LIABILITIES of the Deceased at the date of his or her death – (please give details of the amounts owed by the Deceased in sterling).

Monies owed by the Deceased in the United Kingdom	£
Funeral expenses	£
Monies owed by the Deceased outside the United Kingdom	£

The amount outstanding on any mortgage of property where the mortgage is in the sole name of the Deceased	£
---	---

SECTION F – GIFTS

The Inland Revenue will require full details of any gifts made by the Deceased during the 7 years prior to their death (unless those gifts were made to an exempt body such as a charity or a spouse/civil partner.) If a gift has been made and you are not sure whether it should be mentioned, then please e-mail us with the details and we will try to assist.

Within the 7 years prior to the date of the deceased's date of death, did they:

Make any gifts to one or more persons which in total exceeded £3,000.00 in any one year or set up a Trust:	Yes () No ()	
Total value of gifts made during the seven years	£	
Did the deceased make a gift from which they continued to receive either a direct or an indirect benefit – please give full details, including the value of the gift	£	
Did the Deceased pay for an insurance policy that was not on the deceased's life? If so, please provide details		
Did the deceased have a pension on which all benefits had not been received by the date of the deceased's death?		
Was the deceased entitled to receive any payments from a pension plan after the date of his/her death/		Yes () No ()
Was the deceased entitled to receive any lump sum from a pension plan after the date of death		Yes () No ()

SECTION G –ASSETS HELD IN TRUST :

Was the person who has died receiving a benefit under a trust At the time when they died? At any time within seven years before they died?	
--	--

If there is any further information about the Estate that you think is pertinent, and that you wish mentioned, please let us have details. We will then consider whether the information should go in the relevant forms.

How many copies of the Grant do you need?
(As a rule, you need one copy for each asset at an additional cost of £1.00 each)

()

Now kindly submit the information (by clicking on **FILE > Send to > Mail Recipient as an attachment and put in the following e-mail address: john.busby@busbyslaw.co.uk then click Send**) to enable us to start preparing the paperwork for you as soon as possible. Thank you.

NB: We recommend you save a copy of this form on your computer.