

Date: \_\_\_\_\_

Estate of: \_\_\_\_\_

PROBATE QUESTIONNAIRE

1. Please provide your full name, residence address, telephone number and Social Security number:

\_\_\_\_\_  
Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
County

Telephone: (\_\_\_\_) \_\_\_\_\_ (work)

(\_\_\_\_) \_\_\_\_\_ (home)

\_\_\_\_\_  
Social Security Number

May we call you at work? ( ) Yes ( ) No

2. Where was the Decedent's domicile (i.e. permanent address)?

\_\_\_\_\_  
Address

\_\_\_\_\_  
County

3. What is the Decedent's Social Security number? \_\_\_\_\_

4. What sort of property did the Decedent own? (check the applicable spaces)  
 Is any of this property located outside of Texas? ( ) Yes ( ) No

<u>Property</u>	<u>Location (if outside Texas)</u>
a. _____ House	a. _____
b. _____ Car	b. _____
c. _____ Cash	c. _____
d. _____ Stocks/bonds	d. _____
e. _____ Art or coin collection	e. _____
f. _____ Livestock	f. _____
g. _____ Other real estate	g. _____
h. _____ Farm machinery	h. _____
i. _____ Partnership or business interest	i. _____

5. Do you estimate that the total value of the Decedent's property, exclusive of the value of his or her homestead, exceeds \$50,000? ( ) Yes ( ) No

6. Was the Decedent an income beneficiary or remainderman under the terms of any trust?  
 ( ) Yes ( ) No

7. Did the Decedent have a Will? ( ) Yes ( ) No  
 If so, what date? \_\_\_\_\_  
 Were any Codicils to the Decedent's Will executed? ( ) Yes ( ) No  
 If so, what date? \_\_\_\_\_  
 Who has the original copy? \_\_\_\_\_

8. Were any children born to or adopted by the Decedent? Were any of these children born or adopted after the date the Decedent's Will was executed?  
 ( ) Yes ( ) No  
 Please provide names, ages and addresses:  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

9. Was the Decedent ever divorced? ( ) Yes ( ) No  
If so, please provide the name of the ex-spouse(s) and the date(s) of divorce.

\_\_\_\_\_, \_\_\_\_\_  
\_\_\_\_\_, \_\_\_\_\_

10. Was the Decedent ever widowed? ( ) Yes ( ) No  
If so, please provide the name of the deceased spouse and the date of his or her death.

\_\_\_\_\_, \_\_\_\_\_

11. Was the Decedent a partner or a shareholder in a business?  
( ) Yes ( ) No  
If so, does there exist a partnership agreement or a shareholder agreement?  
( ) Yes ( ) No

Names of surviving partners or shareholders: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

12. Was the Decedent employed at the time of death?  
( ) Yes ( ) No  
If so, please provide the name of the company.

\_\_\_\_\_

13. Was the Decedent a beneficiary under any retirement or pension plan?  
( ) Yes ( ) No  
Company: \_\_\_\_\_

14. What sort of debts exist against the Decedent's estate?

\_\_\_\_\_ Credit cards (approximate amount: \$ \_\_\_\_\_)  
\_\_\_\_\_ Mortgages (approximate amount: \$ \_\_\_\_\_)  
\_\_\_\_\_ Personal loans (approximate amount: \$ \_\_\_\_\_)

15. If there were any debts against real estate, please provide the name and address of the secured creditor(s) and the loan account number(s):.

\_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

16. Did the Decedent make any loans to any person or business which have not been repaid?  
 Yes  No

17. Did the Decedent make any gifts during his or her lifetime for which he or she filed a Gift Tax Return?  
 Yes  No

18. If you are a beneficiary, do you intend to disclaim any of the property passing to you under the Decedent's Will?  Yes  No

19. Can you attend the hearing to prove-up the Decedent's Will?  
 Yes  No  
If not, who will attend?

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

Telephone No.: \_\_\_\_\_

20. Please send us an original of the Decedent's death certificate.