ADMINISTRATION OF ESTATE

QUESTIONNAIRE

1. PARTICULARS FOR THE DECEASED

a.	Full name of the deceased
b.	Occupation of the deceased
c.	Last place of employment and address
d.	Deceased's TRN
e.	Deceased's NIS
f.	Date of death
g.	Exact place of death
0.	
h	Last place of abode
11.	
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OTHE	R PARTICULARS
2.	Name and address of the person who paid funeral expenses
	Will there have a laim for noimh-moment?
×	Will there be a claim for reimbursement?YESNO
3.	Did the deceased leave a Will?YESNO
	If so, please provide:
	a. The name and address of the person who has the Will

b.	The name and	contact information	for the executors

c. The name and contact information for the witnesses_

d. Where THERE IS NO WILL

Please state the name, address and occupation for the administrator (person who will apply for Letters of Administration)

4. Please complete the table of the relatives who were alive at the date of death of the deceased namely spouse, children, parents, sisters or brothers? If yes, please complete the table with their information.

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Name 🔊	Date of Death	Name, age, and address of their children
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5. Does the deceased have any relatives who died BEFORE HIM; namely spouse, children, parents, sisters or brothers? If yes, please complete the table with their information.

Name	Date of Death	Name, age, and address of their children
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PROPERTY LEFT BY THE DECEASED

Personal property

Please complete the table if the deceased died leaving any personal properties such as bank account, shares, insurance policy, motor vehicle etc)

Description	Estimate Value of death)	e (as of date		nd Address of in Possession
				OWFILL
Real Property		HAT	Elle	
Address of Property	Title Reference Volume/folio or valuation #	Estimated Va Property	alue of	Name and address for person in possession
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