TURQUOISE LAW

Miray Pamuk (*LL.B-LL,M*)
Lawyer (LSO#97036G)
Address: 529 Arosa Way, Ottawa, ON, K2V 0R8, Canada
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Estate Planning Questionnaire

Confidential client information for wills and powers of attorney

Please complete this questionnaire as fully as possible before your meeting. The information will help your lawyer understand your family, property, obligations, and wishes. Estimates are acceptable where exact figures are not readily available. Bring relevant agreements, existing estate documents, and beneficiary designations to your consultation.

This questionnaire is for information gathering only. Completing it does not create a lawyer client relationship or replace legal advice. Do not include account passwords, PINs, or full online access credentials.

Date completed	**Preferred name**
Preferred telephone	**Preferred email**
Lawyer or firm	**Meeting date**

Documents to bring

☐ Existing wills and powers of attorney ☐ Marriage or cohabitation agreement
☐ Separation agreement or court order ☐ Corporate or partnership documents
☐ Insurance and pension statements ☐ Recent property and investment summaries

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Personal Information

Information	You	Spouse or partner
Full legal name		
Other names used		
Date of birth		
Place of birth		
Home address		
Occupation		
Employer or business		
Telephone		
Email		
Citizenship and residency		
Marital status		

Marriage and relationship details

Date and place of marriage	**Date cohabitation began**
Date of separation if applicable	**Marriage or cohabitation agreement details**

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Have you or your spouse or partner been previously married or in a common law relationship? ☐ Yes ☐ No

_____

_____

Do you have continuing support property or other obligations from a prior relationship? ☐ Yes ☐ No

_____

_____

If single separated or divorced are you planning to marry or begin cohabiting in the near future? ☐ Yes ☐ No

_____

_____

Children Grandchildren and Dependants

Full legal name	Relationship	Date of birth	Address if different	Special circumstances

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Full legal name	Relationship	Date of birth	Address if different	Special circumstances

Are there stepchildren adopted children or children born outside a current relationship who should be considered? ☐ Yes ☐ No

_____

_____

Are you responsible for any other child or dependant? ☐ Yes ☐ No

_____

_____

Does any child grandchild or dependant have a disability or require ongoing support? ☐ Yes ☐ No

_____

_____

_____

Has any child predeceased you? If yes provide the child's name date of death and the names of that child's descendants. ☐ Yes ☐ No

_____

_____

_____

Your Assets

List all assets, including jointly owned assets and assets held outside Canada. Use approximate current values if exact values are unavailable.

Asset type	Institution ownership and identifying details	Approximate value
Life insurance		
Pensions and annuities		
RRSPs		

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Asset type	Institution ownership and identifying details	Approximate value
RRIFs		
TFSAs		
RESPs		
Bank accounts		
Non registered investments		
Valuable personal property		
Business and private company interests		
Real estate		
Digital assets		
Other assets		

Do you own or have an interest in assets outside Ontario? ☐ Yes ☐ No

Do you own or have an interest in assets outside Canada? ☐ Yes ☐ No

Do you have an interest in an estate or trust? ☐ Yes ☐ No

Have you made loans or advances that should be collected or forgiven on death? ☐ Yes ☐ No

Do you own farmland or farm business property? ☐ Yes ☐ No

Do you own property jointly with anyone other than your spouse or partner? ☐ Yes ☐ No

Do you own an insurance policy on another person's life? ☐ Yes ☐ No

Details of any Yes answer

_____

_____

_____

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Your Spouse or Partner's Assets

List all assets, including jointly owned assets and assets held outside Canada. Use approximate current values if exact values are unavailable.

Asset type	Institution ownership and identifying details	Approximate value
Life insurance		
Pensions and annuities		
RRSPs		
RRIFs		
TFSAs		
RESPs		
Bank accounts		
Non registered investments		
Valuable personal property		
Business and private company interests		
Real estate		
Digital assets		
Other assets		

Do you own or have an interest in assets outside Ontario? ☐ Yes ☐ No

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Do you own farmland or farm business property? ☐ Yes ☐ No

Do you own property jointly with anyone other than your spouse or partner? ☐ Yes ☐ No

Do you own an insurance policy on another person's life? ☐ Yes ☐ No

Details of any Yes answer

_____

_____

_____

_____

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Your Liabilities

Liability type	Creditor ownership and identifying details	Approximate balance
Mortgages		
Personal business or investment loans		
Credit cards and accounts payable		
Guarantees tax debts and other obligations		

Are any of these debts insured? ☐ Yes ☐ No

Details

_____

_____

_____

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Your Spouse or Partner's Liabilities

Liability type	Creditor ownership and identifying details	Approximate balance
Mortgages		
Personal business or investment loans		
Credit cards and accounts payable		
Guarantees tax debts and other obligations		

Are any of these debts insured? ☐ Yes ☐ No

Details

_____

_____

_____

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Existing Estate Planning and Related Arrangements

Do you currently have a will? ☐ Yes ☐ No

Date signed	**Province or country**
Location of original	**Lawyer or firm that prepared it**

Do you currently have powers of attorney or similar documents? ☐ Yes ☐ No

Date signed	**Province or country**
Location of originals	**Names of appointed attorneys**

Are you a beneficiary executor trustee guardian or attorney under another person's estate plan? ☐ Yes ☐ No

_____

_____

_____

Have you made significant gifts transfers or beneficiary designations that your lawyer should consider? ☐ Yes ☐ No

_____

_____

_____

Is there a family trust shareholders agreement partnership agreement or succession plan relevant to your estate? ☐ Yes ☐ No

_____

_____

_____

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Instructions for Your Will

Estate trustees and executors

Role	Full legal name	Address and contact information	Relationship
Primary estate trustee			
Co trustee if any			
First alternate			
Second alternate			

Guardians for minor children

Role	Full legal name	Address and contact information	Relationship
Proposed guardian			
Alternate guardian			

Specific gifts

Cash amount or property	Beneficiary name and address	Alternate beneficiary	Conditions or notes

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Cash amount or property	Beneficiary name and address	Alternate beneficiary	Conditions or notes

Distribution of Your Estate

Should your spouse or partner receive the entire residue of your estate? ☐ Yes ☐ No

If No describe the intended division

_____

_____

_____

_____

If your spouse or partner dies before you select or describe your preferred distribution

☐ Equally among my children
☐ Among my children in different percentages
☐ To named beneficiaries or organizations
☐ Other arrangement described below

_____

_____

_____

_____

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Age for a beneficiary to receive the full share	Interim distribution ages or percentages

If a beneficiary dies before you or before receiving the full share

☐ That beneficiary's descendants receive the share
☐ The surviving named beneficiaries receive the share
☐ Another arrangement described below

_____
_____
_____

Common accident and ultimate distribution

Describe how the estate should be distributed if your spouse or partner children grandchildren and other primary beneficiaries do not survive you or do not become entitled to receive their full shares.

_____
_____
_____
_____
_____

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Other Beneficiaries and Charitable Gifts

Full legal name or organization	Address and contact details	Relationship or charitable purpose	Share amount or gift

Should any beneficiary's gift be held in trust because of age disability vulnerability creditor concerns or another reason? ☐ Yes ☐ No

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_____

_____

Do you wish to exclude any person who might otherwise expect to benefit? ☐ Yes ☐ No

_____

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_____

_____

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Powers of Attorney

Power of attorney for personal care

Role	Full legal name	Address and contact information	Relationship
Primary attorney			
Alternate attorney			

Instructions wishes or concerns relating to health care housing personal support and end of life care

_____

_____

_____

_____

_____

Continuing power of attorney for property

Role	Full legal name	Address and contact information	Relationship
Primary attorney			
Alternate attorney			

Instructions limits compensation wishes or concerns relating to property and finances

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Digital Assets Funeral Wishes and Additional Instructions

Digital assets

Identify important digital property and where your executor can find access instructions. Do not list passwords in this questionnaire.

Type of digital asset	Provider or description	Where access instructions are stored	Desired treatment

Funeral burial cremation and memorial wishes

_____

_____

_____

_____

_____

Organ and tissue donation wishes

_____

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_____

_____

Pets and their care

_____

_____

_____

Other family concerns tax considerations or instructions for your lawyer

_____

_____

_____

_____

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_____

Confirmation and Notes

Please review the questionnaire before your meeting. Your lawyer may need additional details or documents and will advise you about legal and tax issues that arise from your circumstances.

Your signature	**Date**
Spouse or partner signature	**Date**

Lawyer meeting notes

_____

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