
A helping hand for my Executors

Information regarding my Estate



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I,

ask that my family, attorneys and Executors use the information communicated in this booklet to administer my Estate in accordance with my wishes.

My Signature: _____

Date: _____

My important documents

Documents in my **house**

Location:

Type of Documents:

Documents in my **bank**

Bank:

Address:

Type of Documents:

Documents **elsewhere**

Certificate of Title for property:

Will:

Enduring Power of Attorney (Financial):

Appointment of Medical Treatment Decision Maker (also known as Medical Power of Attorney):

Other:

Location:

Other:

Location:

Other:

Location:

My important items

My keys

Location:

Type of keys: **Car**

Location:

Type of keys: **House**

Location:

Type of keys: **Garage Door**

Location:

Type of keys: **Letterbox**

Location:

Type of keys: **Work**

Location:

Type of keys:

Location:

Type of keys:

Location:

Type of keys:

Location:

Type of keys:

My **alarm code**

Code:

Instructions:

My **wallet**

Location:

My **safe**

Safe location:

Keys/code:

My **safe deposit box**

Location:

My **cash stash**

Location:

My Assets

My bank accounts

Bank:

Account No:

Type of Account:

Bank:

Account No:

Type of Account:

Bank:

Account No:

Type of Account:

Bank:

Account No:

Type of Account:

Bank:

Account No:

Type of Account:

Bank:

Account No:

Type of Account:

Bank:

Account No:

Type of Account:

Bank:

Account No:

Type of Account:

Bank:

Account No:

Type of Account:

Did you know that a joint bank account automatically transfers to the surviving account holder on your death?

My shares

Company:

Number of shares:

SRN/HIN:

Company:

Number of shares:

SRN/HIN:

Company:

Number of shares:

SRN/HIN:

Company:

Number of shares:

SRN/HIN:

Company:

Number of shares:

SRN/HIN:

Did you know that you can find the SRN/HIN for your shares on a dividend statement?

My **property**

Address:

Mortgage with:

Principal place of residence: YES NO

Co-owner:

Location of Certificate of Title:

Address:

Mortgage with:

Principal place of residence: YES NO

Co-owner:

Location of Certificate of Title:

Address:

Mortgage with:

Principal place of residence: YES NO

Co-owner:

Location of Certificate of Title:

Did you know that a jointly held property automatically transfers to the surviving owner on your death?

If you don't want this to happen, please contact South East Lawyers to discuss your options.

My **superannuation**

Superannuation Fund:

Member No:

Binding Death Benefit Nomination: YES NO

Beneficiaries:

Is there life insurance in this superannuation: YES NO

If so, how much:

Superannuation Fund:

Member No:

Binding Death Benefit Nomination: YES NO

Beneficiaries:

Is there life insurance in this superannuation: YES NO

If so, how much:

Did you know that a Binding Death Benefit Nomination is only valid if you have signed it up with 2 witnesses?

If your nomination hasn't been witnessed by 2 people, it is not binding on your superannuation fund and the superannuation fund will decide who is to receive your superannuation and any associated life insurance.

My **self managed superannuation**

Superannuation Fund Name:

Trustee:

Binding Death Benefit Nomination: **YES** **NO**

Location of Deed for SMSF:

Accountant:

Auditor:

Assets:

Did you know that self managed superannuation requires careful planning to ensure that your benefits are paid to your desired persons?

If it is not planned properly, your intended beneficiaries may not receive anything, or those who you don't want to benefit might have a claim.

If you don't want this to happen, please contact South East Lawyers to discuss your options.

My investments

Company:

Type of investment:

Policy No:

Company:

Type of investment:

Policy No:

Company:

Type of investment:

Policy No:

Company:

Type of investment:

Policy No:

My **life insurance**

Insurer:

Policy No:

Beneficiary Nomination: YES NO

Beneficiaries:

How much life insurance do you have?

Insurer:

Policy No:

Beneficiary Nomination: YES NO

Beneficiaries:

How much life insurance do you have?

We recommend that you have enough life insurance to pay our your mortgage, so that your family can keep the family home to live in.

My **health insurance**

Insurer:

Policy No:

My other insurance policies

Insurer:

Type of insurance:

Amount insurance:

Policy no:

Insurer:

Type of insurance:

Amount insurance:

Policy no:

Insurer:

Type of insurance:

Amount insurance:

Policy no:

Insurer:

Type of insurance:

Amount insurance:

Policy no:

My **personal belongings** of value

Item:

Location:

Estimated Value:

Beneficiary:

Item:

Location:

Estimated Value:

Beneficiary:

Item:

Location:

Estimated Value:

Beneficiary:

Item:

Location:

Estimated Value:

Beneficiary:

Item:

Location:

Estimated Value:

Beneficiary:

Item:

Location:

Estimated Value:

Beneficiary:

Item:

Location:

Estimated Value:

Beneficiary:

Item:

Location:

Estimated Value:

Beneficiary:

My **businesses**

Name:

Co-owner:

Type of business:

Name:

Co-owner:

Type of business:

Name:

Co-owner:

Type of business:

Name:

Co-owner:

Type of business:

My **companies**

Name:

ACN:

Directors:

Shareholders:

Purpose of company:

Name:

ACN:

Directors:

Shareholders:

Purpose of company:

Name:

ACN:

Directors:

Shareholders:

Purpose of company:

My trusts

Name:

Trustee:

Appointor:

Beneficiaries:

Purpose of trust:

Name:

Trustee:

Appointor:

Beneficiaries:

Purpose of trust:

Name:

Trustee:

Appointor:

Beneficiaries:

Purpose of trust:

My pensions

Provider:

Pension number:

Provider:

Pension number:

Provider:

Pension number:

My funeral bond/prepaid funeral

Provider:

Details of policy:

Amount paid:

My Liabilities

My credit cards

Bank:

Credit card no:

Bank:

Credit card no:

Bank:

Credit card no:

Bank:

Credit card no:

My mortgages

Bank:

Property mortgaged:

Account no:

Bank:

Property mortgaged:

Account no:

Bank:

Property mortgaged:

Account no:

Bank:

Property mortgaged:

Account no:

Bank:

Property mortgaged:

Account no:

My **personal loans**

Bank:

Amount of loan:

Account no:

Bank:

Amount of loan:

Account no:

Bank:

Amount of loan:

Account no:

My **other amounts owed to people**

Person:

Amount owed:

Person:

Amount owed

My Personal Information

My internet banking

Bank:

User id:

Password:

Bank:

User id:

Password:

Bank:

User id:

Password:

Bank:

User id:

Password:

My **social media accounts** and **other online presences**

Facebook User ID

Password:

LinkedIn User ID

Password:

Twitter User ID

Password:

Instagram User ID

Password:

Snap Chat User ID

Password:

Youtube User ID:

Password:

iTunes User ID:

Password:

Netflix User ID:

Password:

Paypal: User ID

Password:

Other:

User id:

Password:

Other:

User id:

Password:

My **email accounts**

Host:

Email address:

User id:

Password:

Host:

Email address:

User id:

Password:

Host:

Email address:

User id:

Password:

My **pets**

Name:

Type:

Age:

Veterinarian:

**Who will take over
care:**

Name:

Type:

Age:

Veterinarian:

**Who will take over
care:**

Name:

Type:

Age:

Veterinarian:

**Who will take over
care:**

My **telephone**

Telephone no:

Provider:

Account no:

Telephone no:

Provider:

Account no:

My **mobile telephone**

Telephone no:

Provider:

Account no:

Unlock code:

My **lawyer**

Name:

Law firm:

Telephone no:

My **accountant**

Name:

Firm:

Telephone no:

My **financial planner**

Name:

Firm:

Telephone no:

My **personal banker**

Name:

Firm:

Telephone no:

Other **important information**

Lined area for providing other important information.

Other **important information**

Area for providing other important information, containing horizontal dashed lines for writing.



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