



ATTORNEYS & COUNSELORS

CONFIDENTIAL  
PROBATE  
QUESTIONNAIRE

124 Fulton St. E, Suite 100  
Grand Rapids, MI 49503  
P: 616.458.3994  
F: 616.458.2410  
[www.rpmattorneys.com](http://www.rpmattorneys.com)

**I. DECEDENT'S INFORMATION**

Name of Decedent: \_\_\_\_\_

Address at time of death: \_\_\_\_\_

Date of Death: \_\_\_\_\_ Decedent's SS#: \_\_\_\_\_

**II. PERSONAL REPRESENTATIVE**

Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

Address: \_\_\_\_\_ SS#: \_\_\_\_\_

\_\_\_\_\_ Date of Birth: \_\_\_\_\_

Driver's License #: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Relationship to Decedent: \_\_\_\_\_

**III. FAMILY MATTERS**

**SPOUSE:**

Full name of Spouse: \_\_\_\_\_

Spouse's Date of Birth: \_\_\_\_\_

Spouse's SS#: \_\_\_\_\_

**LIVING CHILDREN (OF DECEDENT):**

**Child #1**

Full Legal Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

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

Phone #: \_\_\_\_\_ SS#: \_\_\_\_\_

**Child #2**

Full Legal Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

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

Phone #: \_\_\_\_\_ SS#: \_\_\_\_\_

**Child #3**

Full Legal Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

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

Phone #: \_\_\_\_\_ SS#: \_\_\_\_\_

**Child #4**

Full Legal Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

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

Phone #: \_\_\_\_\_ SS#: \_\_\_\_\_

**Child #5**

Full Legal Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

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

Phone #: \_\_\_\_\_ SS#: \_\_\_\_\_

**DECEASED CHILDREN (OF DECEDENT):**

**Child #1**

Full Legal Name: \_\_\_\_\_ Date of Death: \_\_\_\_\_

SS#: \_\_\_\_\_

**Child #2**

Full Legal Name: \_\_\_\_\_ Date of Death: \_\_\_\_\_

SS#: \_\_\_\_\_

**Child #3**

Full Legal Name: \_\_\_\_\_ Date of Death: \_\_\_\_\_

SS#: \_\_\_\_\_

\*If any of the above "Deceased Children" have any surviving children (which would be the Decedent's grandchildren or the "Deceased Children's" *descendants*), please fill in their information below:

**SURVIVING CHILDREN OF DECEASED CHILDREN, IF ANY:**

**Child #1**

Full Legal Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

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

Phone #: \_\_\_\_\_ SS#: \_\_\_\_\_

**Child #2**

Full Legal Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

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

Phone #: \_\_\_\_\_ SS#: \_\_\_\_\_

**Child #3**

Full Legal Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

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

Phone #: \_\_\_\_\_ SS#: \_\_\_\_\_

**\*THE FOLLOWING FAMILY CATEGORIES NEED ONLY BE FILLED OUT IF THERE IS  
NO SURVIVING SPOUSE, CHILDREN, OR GRANDCHILDREN.**

**DECEDENT'S PARENTS:**

**Parent #1**

Full Legal Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

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

Phone #: \_\_\_\_\_ SS#: \_\_\_\_\_

**Parent #2**

Full Legal Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

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

Phone #: \_\_\_\_\_ SS#: \_\_\_\_\_

**DECEDENT'S SIBLINGS:**

**Sibling #1**

Full Legal Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

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

Phone #: \_\_\_\_\_ SS#: \_\_\_\_\_

**Sibling #2**

Full Legal Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

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

Phone #: \_\_\_\_\_ SS#: \_\_\_\_\_

**Sibling #3**

Full Legal Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

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

Phone #: \_\_\_\_\_ SS#: \_\_\_\_\_

## **IV. ASSETS**

### **SAFETY DEPOSIT BOXES:**

Name and address of Banks where Decedent had a safe-deposit box: \_\_\_\_\_  
\_\_\_\_\_

Contents, if known? \_\_\_\_\_

Keys kept where: \_\_\_\_\_

### **BANK AND CREDIT UNION ACCOUNTS (including CD's, money market, etc.):**

#### **Institution #1**

Name: \_\_\_\_\_ Account #: \_\_\_\_\_

Address: \_\_\_\_\_ How is account titled: \_\_\_\_\_

Amount in Account at time of death: \_\_\_\_\_ Beneficiary: \_\_\_\_\_

#### **Institution #2**

Name: \_\_\_\_\_ Account #: \_\_\_\_\_

Address: \_\_\_\_\_ How is account titled: \_\_\_\_\_

Amount in Account at time of death: \_\_\_\_\_ Beneficiary: \_\_\_\_\_

#### **Institution #3**

Name: \_\_\_\_\_ Account #: \_\_\_\_\_

Address: \_\_\_\_\_ How is account titled: \_\_\_\_\_

Amount in Account at time of death: \_\_\_\_\_ Beneficiary: \_\_\_\_\_

### **IRAs AND 401k:**

#### **Institution #1**

Name: \_\_\_\_\_ Account #: \_\_\_\_\_

Address: \_\_\_\_\_ How is account titled: \_\_\_\_\_

Amount in Account at time of death: \_\_\_\_\_ Beneficiary: \_\_\_\_\_

#### **Institution #2**

Name: \_\_\_\_\_ Account #: \_\_\_\_\_

Address: \_\_\_\_\_ How is account titled: \_\_\_\_\_

Amount in Account at time of death: \_\_\_\_\_ Beneficiary: \_\_\_\_\_

**Institution #3**

Name: \_\_\_\_\_ Account #: \_\_\_\_\_  
Address: \_\_\_\_\_ How is account titled: \_\_\_\_\_  
Amount in Account at time of death: \_\_\_\_\_ Beneficiary: \_\_\_\_\_

**LIFE INSURANCE:**

Insurance on Decedent's Life (attach additional pages, if necessary):

Insurer: \_\_\_\_\_  
Policy #: \_\_\_\_\_  
Amount: \_\_\_\_\_  
Beneficiary: \_\_\_\_\_  
Contingent Beneficiary: \_\_\_\_\_  
Name of Insurance Agent: \_\_\_\_\_  
Agent's Address: \_\_\_\_\_  
Agent's Phone #: \_\_\_\_\_

**MORTGAGE INSURANCE:**

Mortgage or Credit Life Insurance (attach additional pages, if necessary):

Insurer: \_\_\_\_\_  
Policy #: \_\_\_\_\_  
Name of Insurance Agent: \_\_\_\_\_  
Agent's Address: \_\_\_\_\_  
Agent's Phone #: \_\_\_\_\_

**OTHER INSURANCES:**

Any additional Group Insurances, Accidental Death Policies, Employment Death Plans, Pension Plans:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**STOCKS AND BONDS:**

**Company #1**

Name: \_\_\_\_\_ Account #: \_\_\_\_\_

Address: \_\_\_\_\_ How is account titled: \_\_\_\_\_

Number of Shares: \_\_\_\_\_ Amount in Account at time of death: \_\_\_\_\_

Location of Stock Certificates or Bonds: \_\_\_\_\_

**Company #2**

Name: \_\_\_\_\_ Account #: \_\_\_\_\_

Address: \_\_\_\_\_ How is account titled: \_\_\_\_\_

Number of Shares: \_\_\_\_\_ Amount in Account at time of death: \_\_\_\_\_

Location of Stock Certificates or Bonds: \_\_\_\_\_

**Company #3**

Name: \_\_\_\_\_ Account #: \_\_\_\_\_

Address: \_\_\_\_\_ How is account titled: \_\_\_\_\_

Number of Shares: \_\_\_\_\_ Amount in Account at time of death: \_\_\_\_\_

Location of Stock Certificates or Bonds: \_\_\_\_\_

**NAME OF FINANCIAL PLANNER OR STOCKBROKERS:**

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

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

Company: \_\_\_\_\_ Phone #: \_\_\_\_\_

**ACCOUNTANT:**

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

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

Company: \_\_\_\_\_ Phone #: \_\_\_\_\_

**ACCOUNTS AND NOTES RECEIVABLE:**

Name of Debtor: \_\_\_\_\_

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

Phone #: \_\_\_\_\_ Approximate amount receivable on date of death: \_\_\_\_\_

**REAL ESTATE:**

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

Approximate Value: \_\_\_\_\_

Outstanding Balance: \_\_\_\_\_

Mortgage or Land Contract: \_\_\_\_\_ How is property titled? \_\_\_\_\_

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

Approximate Value: \_\_\_\_\_

Outstanding Balance: \_\_\_\_\_

Mortgage or Land Contract: \_\_\_\_\_ How is property titled? \_\_\_\_\_

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

Approximate Value: \_\_\_\_\_

Outstanding Balance: \_\_\_\_\_

Mortgage or Land Contract: \_\_\_\_\_ How is property titled? \_\_\_\_\_

**BUSINESS INTERESTS:**

Business Name: \_\_\_\_\_ % of Ownership Interest: \_\_\_\_\_

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

Is there a Buy-Sell Agreement regarding any of the business interests? Yes: \_\_\_\_\_ No: \_\_\_\_\_

If yes, which business(es), and where is a copy of the Agreement? \_\_\_\_\_

\_\_\_\_\_

Business Name: \_\_\_\_\_ % of Ownership Interest: \_\_\_\_\_

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

Is there a Buy-Sell Agreement regarding any of the business interests? Yes: \_\_\_\_\_ No: \_\_\_\_\_

If yes, which business(es), and where is a copy of the Agreement? \_\_\_\_\_

\_\_\_\_\_



**AUTOMOBILES:**

**Vehicle #1:**

Year: \_\_\_\_\_ Make: \_\_\_\_\_ Model: \_\_\_\_\_ Mileage: \_\_\_\_\_  
Present Condition: \_\_\_\_\_ Current Value: \_\_\_\_\_ How is vehicle titled: \_\_\_\_\_

**Vehicle #2:**

Year: \_\_\_\_\_ Make: \_\_\_\_\_ Model: \_\_\_\_\_ Mileage: \_\_\_\_\_  
Present Condition: \_\_\_\_\_ Current Value: \_\_\_\_\_ How is vehicle titled: \_\_\_\_\_

**Vehicle #3:**

Year: \_\_\_\_\_ Make: \_\_\_\_\_ Model: \_\_\_\_\_ Mileage: \_\_\_\_\_  
Present Condition: \_\_\_\_\_ Current Value: \_\_\_\_\_ How is vehicle titled: \_\_\_\_\_

**Vehicle #4:**

Year: \_\_\_\_\_ Make: \_\_\_\_\_ Model: \_\_\_\_\_ Mileage: \_\_\_\_\_  
Present Condition: \_\_\_\_\_ Current Value: \_\_\_\_\_ How is vehicle titled: \_\_\_\_\_

**Vehicle #5:**

Year: \_\_\_\_\_ Make: \_\_\_\_\_ Model: \_\_\_\_\_ Mileage: \_\_\_\_\_  
Present Condition: \_\_\_\_\_ Current Value: \_\_\_\_\_ How is vehicle titled: \_\_\_\_\_

**CASH ON HAND:**

Amount: \_\_\_\_\_

**VALUABLE PERSONAL PROPERTY (e.g. Jewelry, Coin or Stamp Collections, Antiques, etc.):**

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**OTHER IMPORTANT ASSETS:**

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## V. DEBTS

### CREDIT CARDS:

#### Credit Card #1

Name: \_\_\_\_\_ Account #: \_\_\_\_\_

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

Approximate debt owed at time of death: \_\_\_\_\_

#### Credit Card #2

Name: \_\_\_\_\_ Account #: \_\_\_\_\_

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

Approximate debt owed at time of death: \_\_\_\_\_

#### Credit Card #3

Name: \_\_\_\_\_ Account #: \_\_\_\_\_

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

Approximate debt owed at time of death: \_\_\_\_\_

#### Credit Card #4

Name: \_\_\_\_\_ Account #: \_\_\_\_\_

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

Approximate debt owed at time of death: \_\_\_\_\_

### REAL ESTATE LOANS:

#### Creditor #1

Name: \_\_\_\_\_ Account #: \_\_\_\_\_

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

Approximate debt owed at time of death: \_\_\_\_\_

#### Creditor #2

Name: \_\_\_\_\_ Account #: \_\_\_\_\_

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

Approximate debt owed at time of death: \_\_\_\_\_

**OTHER DEBTS (e.g. Automobile loans, personal debts, etc.):**

**Creditor #1**

Name: \_\_\_\_\_ Account #: \_\_\_\_\_

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

Approximate debt owed at time of death: \_\_\_\_\_

**Creditor #2**

Name: \_\_\_\_\_ Account #: \_\_\_\_\_

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

Approximate debt owed at time of death: \_\_\_\_\_

**Creditor #3**

Name: \_\_\_\_\_ Account #: \_\_\_\_\_

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

Approximate debt owed at time of death: \_\_\_\_\_

**Creditor #4**

Name: \_\_\_\_\_ Account #: \_\_\_\_\_

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

Approximate debt owed at time of death: \_\_\_\_\_

**Creditor #5**

Name: \_\_\_\_\_ Account #: \_\_\_\_\_

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

Approximate debt owed at time of death: \_\_\_\_\_

**Creditor #6**

Name: \_\_\_\_\_ Account #: \_\_\_\_\_

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

Approximate debt owed at time of death: \_\_\_\_\_

**Creditor #7**

Name: \_\_\_\_\_ Account #: \_\_\_\_\_

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

Approximate debt owed at time of death: \_\_\_\_\_

## **VI. DOCUMENTS TO BRING TO MEETING WITH LEGAL COUNSEL**

- \_\_\_\_\_ Deeds to Real Property
- \_\_\_\_\_ Mortgages/Land Contracts
- \_\_\_\_\_ Leases
- \_\_\_\_\_ Vehicle Titles
- \_\_\_\_\_ Stock Certificates
- \_\_\_\_\_ Municipal Bonds
- \_\_\_\_\_ Savings Bonds, Treasury Bills, Treasury Notes
- \_\_\_\_\_ Certificates of Deposit with most recent statement
- \_\_\_\_\_ Checking account register and most recent bank statements
- \_\_\_\_\_ Any checks payable to Decedent
- \_\_\_\_\_ Insurance Policies (Fire, Liability, and Medical)
- \_\_\_\_\_ Life Insurance Policies – (Insuring Decedent or insuring other persons but owned by Decedent)
- \_\_\_\_\_ Promissory Notes payable to or from Decedent, including mortgage notes
- \_\_\_\_\_ Stock Purchase Agreements
- \_\_\_\_\_ Partnership Agreements
- \_\_\_\_\_ Any Gift Tax Returns
- \_\_\_\_\_ Retirement, Annuity or Savings Investment Contracts, Plans or information
- \_\_\_\_\_ Revocable Trust Agreements
- \_\_\_\_\_ Original Last Will & Testament and Codicils
- \_\_\_\_\_ Funeral-related bills
- \_\_\_\_\_ Unpaid bills of Decedent
- \_\_\_\_\_ Any mail to Decedent of a financial nature
- \_\_\_\_\_ Certified Copy of Death Certificate