

Where I have placed my will:

Where I keep certified copies of my I D book:

Organ donation:

Living will:

My pets needs:

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Funeral Details

Place of worship:

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Requests regarding burial /cremation and scattering of ashes:

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Preferred funeral arrangements:

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Payment options for funeral:

Burial scheme / Funeral Policy:

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Financial Details

Income tax number:

Accountants details:

E-mail: Tel:

Employment / Sources of income details:

Bank accounts, insurance, investments, policies, pension, unit trusts, loans, shares, off shore assets, etc.

1. Institution: Account no:

Type of account:

Contact details:

2. Institution: Account no:

Type of account:

Contact details:

3. Institution: Account no:

Type of account:

Contact details:

4. Institution: Account no:

Type of account:

Contact details:

Outstanding accounts to be paid up and closed, e.g. Doctor, Dentist, pharmacy, credit card, clothing & telephone accounts, DSTV, security service, car payments, etc.

Account Details	Account Number	Contact Details: Tel / Email
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Ownership documents / H P / lease details for motor vehicles:

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Residential Property Details

Erf number: Deed in the name of:

Bank: Tel:

Bond account number:

If bonded the bank holds the deed, if not, state where the title deed is kept:

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Bond / life insurance

Insurer: Policy no:

e-mail: Tel:

Details of Rates & Taxes Account / Body Corporate / Managing Agents:

Details:

Contact: Account Number:

e-mail: Tel:

Other:

Details of Rates & Taxes Account / Body Corporate / Managing Agents:

Details:

Contact: Account Number:

e-mail: Tel:

Details of Timeshare:

Resort: Tel:

Ref / Account no:

RCI / other: Tel:

Medical Aid

Name of Medical Aid: Tel:

Account / Ref no:

Details of executor: (individual or institution nominated to carry out the terms of one's will)

Name of person / Institution:

If person state ID number:

If Institution state Account / Ref number:

e-mail: Tel:

Details of Administrators of Trust:

Details of Trustees:

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Institution:

Contact details:

Domestic employees details, contract, UIF, etc.

Full Name: Tel:

ID Number: UIF Number:

Other Details:

Details of firearms, locations of licences and access to safe:

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Note any other items that have not been mentioned in this list, e.g. details of CC or partnership agreements, ante nuptial contracts, divorce agreements, hiring or letting contracts, safe keys / combinations, passwords for computer, a last message, where the gold is buried, etc.

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Customer's name: _____

Client's signature _____

Signed at _____ on this _____ day of _____ 20____