

**Estate Administration Questionnaire**  
**Estate of \_\_\_\_\_**

1. Date and place of birth: \_\_\_\_\_
2. Date of Death: \_\_\_\_\_
3. Social Security No. \_\_\_\_\_
4. Place of domicile: \_\_\_\_\_
5. Occupation: \_\_\_\_\_
6. Marital Status: \_\_\_\_\_
7. Spouse Name: \_\_\_\_\_
8. Spouse Social Security No. \_\_\_\_\_

**Family Members Information:**

9. Name: \_\_\_\_\_ Relationship: \_\_\_\_\_  
Address: \_\_\_\_\_  
Social Security No: \_\_\_\_\_  
Telephone Number: \_\_\_\_\_
10. Name: \_\_\_\_\_ Relationship: \_\_\_\_\_  
Address: \_\_\_\_\_  
Social Security No: \_\_\_\_\_  
Telephone Number: \_\_\_\_\_
11. Name: \_\_\_\_\_ Relationship: \_\_\_\_\_  
Address: \_\_\_\_\_  
Social Security No: \_\_\_\_\_  
Telephone Number: \_\_\_\_\_
12. Name: \_\_\_\_\_ Relationship: \_\_\_\_\_  
Address: \_\_\_\_\_  
Social Security No: \_\_\_\_\_  
Telephone Number: \_\_\_\_\_
13. Name: \_\_\_\_\_ Relationship: \_\_\_\_\_  
Address: \_\_\_\_\_  
Social Security No: \_\_\_\_\_  
Telephone Number: \_\_\_\_\_
14. Name: \_\_\_\_\_ Relationship: \_\_\_\_\_  
Address: \_\_\_\_\_  
Social Security No: \_\_\_\_\_  
Telephone Number: \_\_\_\_\_

Does the Decedent have a Safety Deposit Box? Yes or No

If Yes, please list all property is Safety Deposit Box: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Life Insurance Policies:**

Name of Insurance: \_\_\_\_\_  
Address: \_\_\_\_\_  
Beneficiary: \_\_\_\_\_  
Beneficiaries Address: \_\_\_\_\_  
Amount: \_\_\_\_\_

Name of Insurance: \_\_\_\_\_  
Address: \_\_\_\_\_  
Beneficiary: \_\_\_\_\_  
Beneficiaries Address: \_\_\_\_\_  
Amount: \_\_\_\_\_

Name of Insurance: \_\_\_\_\_  
Address: \_\_\_\_\_  
Beneficiary: \_\_\_\_\_  
Beneficiaries Address: \_\_\_\_\_  
Amount: \_\_\_\_\_

Please list all property with a Value of more then \$2,000.

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

Please list automobiles in decedent's name alone: (VIN #, Make, Model, and Year)

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

List all Jiontly held Assets: (Example: Bank Accounts) \_\_\_\_\_

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

List all Accounts in Decedent's name alone: \_\_\_\_\_

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

List all Stocks/Bonds/Annuities in decedent's name: \_\_\_\_\_

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

List all Property owned by the decedent: \_\_\_\_\_

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

Is an Accountant going to file the Federal Estate Tax Return? Yes or No

Has an estate bank account been open? Yes or No

Which Bank: \_\_\_\_\_

Has a federal identification number been applied for? Yes or No

If yes, what is the number: \_\_\_\_\_