

Information

Title		Full names		Surname	
DOB		Email		Phone	
Address					

MARRITAL STATUS/MIRRORING

Married	<input type="checkbox"/>	Does this will form part of a mirror will? (Married and Civil Partner)			<input type="checkbox"/> Yes	<input type="checkbox"/> No
Civil Partner	<input type="checkbox"/>	Is this will being made in contemplation of marriage/civil partnership?			<input type="checkbox"/> Yes	<input type="checkbox"/> No
Cohabiting	<input type="checkbox"/>					
Single	<input type="checkbox"/>	Title		Full Names		
Widowed	<input type="checkbox"/>	DOB		Email		Phone

FOREIGN ASSETTS

Does the testator have any property/assets abroad?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	If no go to Go to funerals
Has the testator made a foreign will they do not wish to revoke?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Is any foreign property within the EU / EEA	<input type="checkbox"/> Yes	<input type="checkbox"/> No	If no then go to Go to funerals
Shall the law of England and Wales govern the succession of foreign assets within the EU / EEA?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	

FUNERAL ARRANGEMENTS

Do you want to specify any funeral arrangements?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Go to organ donation section
Do you wish to be buried or cremated?	<input type="checkbox"/> Buried	<input type="checkbox"/> Cremated	<input type="checkbox"/> No Preference

State any other requirements:

ORGAN DONATION

Do you wish to make your organs available for donation / scientific purposes?

<input type="checkbox"/>	No
<input type="checkbox"/>	Yes all organs
<input type="checkbox"/>	Yes, but only.... <i>open area where they can write what organs</i>
<input type="checkbox"/>	Yes all organs except <i>open area where they can write type.</i>