

PROBATE INTAKE

Appointment Date: _____

Your Full Name: _____ Your e-mail address: _____

Address: _____

City/State/Zip: _____

Cell Phone: _____ Work Telephone: _____

Place of Employment: _____ Occupation: _____

Address of Employer: _____

Driver's License #: _____ Birthdate: _____

Social Security #: _____ - _____ - _____ (required by court) Sex: M ☐ F ☐

Have you ever been convicted of a crime? (If yes, please explain): _____

Decedent's Full name: _____

Any Other Names for Decedent (AKA): _____

Date of Birth: _____ Date of Death _____

Decedent's Social Security #: _____ - _____ - _____ Decedent's DL #: _____

Address of Decedent: _____ County: _____

Where did Decedent pass (city, county, state)?; _____

Did decedent have a will? Y ☐ N ☐ Do you have the original will? Y ☐ N ☐

Who is listed as Executor of the Will?: _____

Property owned by Decedent:

Home: _____ Is there a mortgage?: _____

Bank Accts:

Name of Bank: _____ checking ☐ savings ☐ Approx Balance: _____

Name of Bank: _____ checking ☐ savings ☐ Approx Balance: _____

Vehicle year, make, model: _____ VIN: _____

IRAs/401ks/Other Accounts: _____

[attach additional pages / documents if necessary]

Please bring most recent account statements to your appointment.

Name, address, email address & phone # for beneficiaries: They MUST be contacted

1. _____

2. _____

3. _____

How Were You Referred to Heritage Law?: _____

Who Will Be Responsible for Your Account With Us?: _____

Alternate contact person, to contact in case of an emergency: (court forms require this information)

Name: _____ Phone Number: _____

Address: _____

Alternate Contact Person's Email: _____

OTHER CONCERNS OR COMMENTS WHICH YOU FEEL WILL BE HELPFUL TO THE ATTORNEY: