

Lasting Powers of Attorney

Questionnaire

To be completed in conjunction with our Factsheet

Specialist services from the
Tax and Estate Planning Department

1. The Discovery Process

IMPORTANT Please read this notice

The terms under which we provide legal services are strictly controlled in accordance with the guidance of our Regulator, the Solicitors Regulation Authority. These regulations are in place to protect you and to help us ensure the legal services that we provide are accurate.

Frequently we are asked to have an initial meeting with potential clients to establish whether:-

- the potential client wants to instruct us, and
- we have the relevant legal expertise, and
- the level of our fees is acceptable, and
- the members of our team are compatible with the potential client.

In all cases, there must be a clear understanding of the basis on which the first meeting is held and the extent of our responsibilities, whether or not you decide to instruct us.

In accordance with our regulatory requirements, we maintain a professional indemnity insurance policy. In order that you may be assured that our advice is covered by that policy, you will need to formally retain us, regardless of whether you decide to instruct us beyond the first meeting.

On the following page you will find our Retainer which should be read in conjunction with our terms and conditions.

Thank you for your attention to this.



2. Terms - The Discovery Process

We ask that you complete this before we meet.

There is no obligation to instruct us beyond the Initial Meeting, however if you do not, this meeting will be charged at a fixed fee of £200 plus VAT. Should you choose to instruct us in the preparation of Lasting Powers of Attorney, this fixed charge will not be made but the fees set out in our Factsheet will apply.

The Initial Meeting performs an important function of allowing you to determine whether you would like to retain us and for us to determine whether you qualify to be a client of this firm.

Therefore, whether or not we continue to act for you beyond your Initial Meeting, please read the following and sign below to acknowledge that:-

1. there is no obligation to engage Whitehead Monckton beyond the Initial Meeting,
2. if Whitehead Monckton incurs reasonable disbursements (such as Land Registry fees) during (and necessary to) the Initial Meeting you shall pay these whether or not you continue to instruct Whitehead Monckton,
3. you should not rely on the discussions in the Initial Meeting and any information you receive unless it is supported by written Legal Advice contained in a letter or other documents from Whitehead Monckton,
4. you acknowledge that you shall complete this questionnaire as fully as possible and to the best of your knowledge information and belief the information is correct,
5. For the purpose of the Initial Meeting you are engaging Whitehead Monckton as your Solicitors in accordance with the firm's Terms and Conditions.

Client 1 print name	Client 2 print name
Client 1 signature	Client 2 signature

3. About You

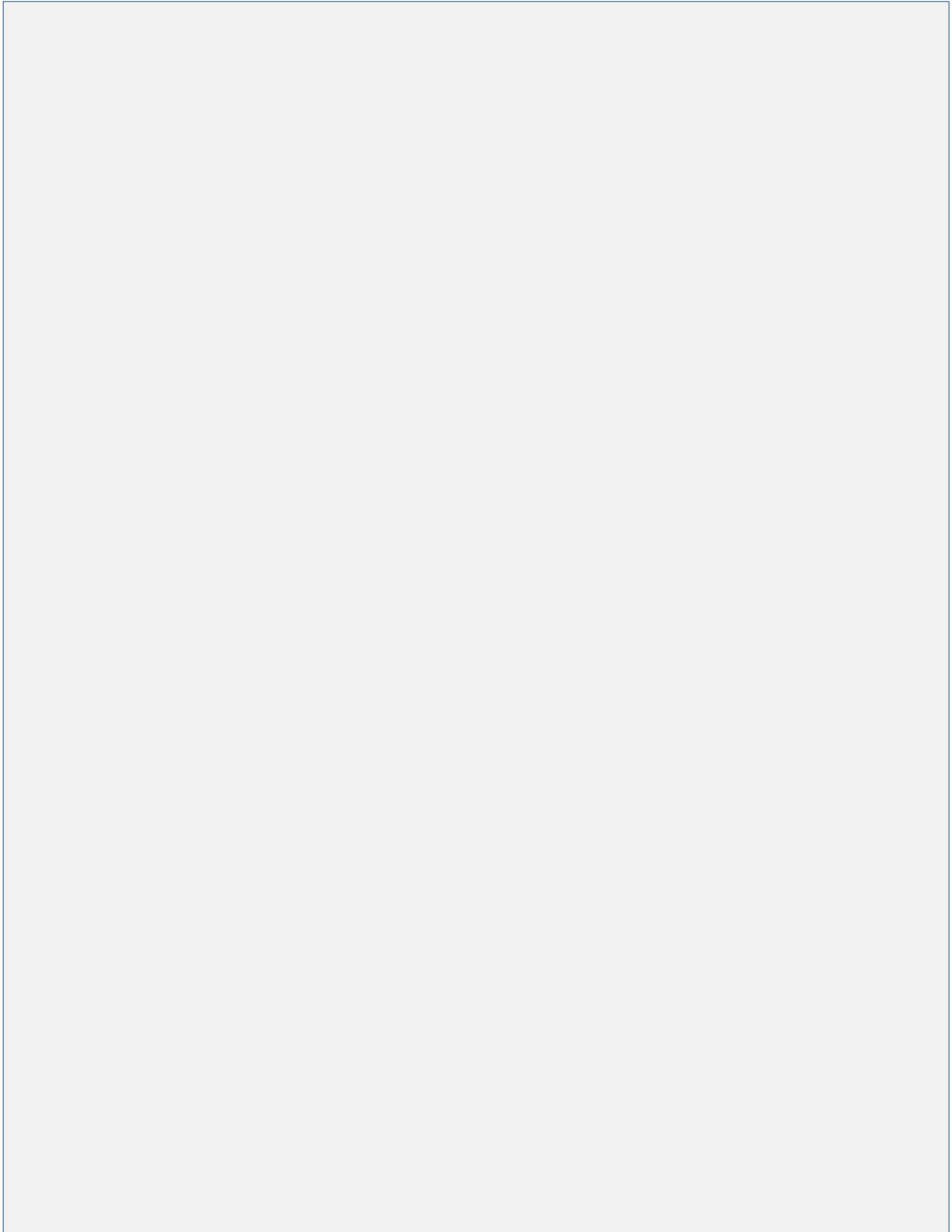
Please complete the following as comprehensively as possible.

Client 1	
Title	Mr/Mrs/Miss/Ms/Dr/Prof/other
Surname	
Forenames	
Alias/maiden name	
Male	<input type="checkbox"/>
Female	<input type="checkbox"/>
	Organ donor register? <input type="checkbox"/>
Marital status	
Date of birth	
Usual residential address	
	Postcode
Contact details	Home telephone
	Mobile telephone
	Office telephone
	Email address
Occupation	
NI number	
Notes	

Client 2	
Title	Mr/Mrs/Miss/Ms/Dr/Prof/other
Surname	
Forenames	
Alias/maiden name	
Male	<input type="checkbox"/>
Female	<input type="checkbox"/>
	Organ donor register? <input type="checkbox"/>
Marital status	
Date of birth	
Usual residential address	
	Same as Client 1 <input type="checkbox"/>
	Postcode
Contact details	Home telephone
	Mobile telephone
	Office telephone
	Email address
Occupation	
NI number	
Notes	

4. Family Tree

It is helpful to us if you sketch your family tree below, indicating marriage by '=' and writing the ages of any person under the age of 18.



5. Schedule....assets

Please complete the following as comprehensively as possible.

Assets (estimated)			
	Client 1	Client 2	Joint
Main home	£ <input type="text"/>	£ <input type="text"/>	£ <input type="text"/>
Other property	£ <input type="text"/>	£ <input type="text"/>	£ <input type="text"/>
Foreign property	£ <input type="text"/>	£ <input type="text"/>	£ <input type="text"/>
Cars	£ <input type="text"/>	£ <input type="text"/>	£ <input type="text"/>
Personal chattels	£ <input type="text"/>	£ <input type="text"/>	£ <input type="text"/>
Other	£ <input type="text"/>	£ <input type="text"/>	£ <input type="text"/>
Other	£ <input type="text"/>	£ <input type="text"/>	£ <input type="text"/>
Total	£ <input type="text"/>	£ <input type="text"/>	£ <input type="text"/>
	Client 1	Client 2	Joint
Bank current a/c	£ <input type="text"/>	£ <input type="text"/>	£ <input type="text"/>
Bank savings a/c	£ <input type="text"/>	£ <input type="text"/>	£ <input type="text"/>
Cash ISAs	£ <input type="text"/>	£ <input type="text"/>	£ <input type="text"/>
Other ISAs	£ <input type="text"/>	£ <input type="text"/>	£ <input type="text"/>
Investment Bonds	£ <input type="text"/>	£ <input type="text"/>	£ <input type="text"/>
Premium Bonds	£ <input type="text"/>	£ <input type="text"/>	£ <input type="text"/>
Other NS&I	£ <input type="text"/>	£ <input type="text"/>	£ <input type="text"/>
Unit Trusts	£ <input type="text"/>	£ <input type="text"/>	£ <input type="text"/>
Stocks and shares	£ <input type="text"/>	£ <input type="text"/>	£ <input type="text"/>
Business Interests	£ <input type="text"/>	£ <input type="text"/>	£ <input type="text"/>
Other	£ <input type="text"/>	£ <input type="text"/>	£ <input type="text"/>
Other	£ <input type="text"/>	£ <input type="text"/>	£ <input type="text"/>
Other	£ <input type="text"/>	£ <input type="text"/>	£ <input type="text"/>
Total	£ <input type="text"/>	£ <input type="text"/>	£ <input type="text"/>

6. Schedule ...liabilities & income

Please complete the following as comprehensively as possible.

Liabilities			
	Client 1	Client 2	Joint
Mortgage - Main home	£ <input type="text"/>	£ <input type="text"/>	£ <input type="text"/>
Mortgage - other	£ <input type="text"/>	£ <input type="text"/>	£ <input type="text"/>
Secured loans	£ <input type="text"/>	£ <input type="text"/>	£ <input type="text"/>
Personal loans	£ <input type="text"/>	£ <input type="text"/>	£ <input type="text"/>
Hire purchase	£ <input type="text"/>	£ <input type="text"/>	£ <input type="text"/>
Credit cards	£ <input type="text"/>	£ <input type="text"/>	£ <input type="text"/>
Finance	£ <input type="text"/>	£ <input type="text"/>	£ <input type="text"/>
Guarantees	£ <input type="text"/>	£ <input type="text"/>	£ <input type="text"/>
Other	£ <input type="text"/>	£ <input type="text"/>	£ <input type="text"/>
Other	£ <input type="text"/>	£ <input type="text"/>	£ <input type="text"/>
Other	£ <input type="text"/>	£ <input type="text"/>	£ <input type="text"/>
Total	£ <input type="text"/>	£ <input type="text"/>	£ <input type="text"/>

Gross Annual Income		
	Client 1	Client 2
Main employment	£ <input type="text"/>	£ <input type="text"/>
Pensions	£ <input type="text"/>	£ <input type="text"/>
Bank interest	£ <input type="text"/>	£ <input type="text"/>
Share dividends	£ <input type="text"/>	£ <input type="text"/>
Other	£ <input type="text"/>	£ <input type="text"/>

If you intend to apply for a fee remission or exemption you will need to provide evidence of your income

7. Attorney(s)

Please complete the following as comprehensively as possible.

Attorney 1		Each other <input type="checkbox"/>
Title	Mr/Mrs/Miss/Ms/Dr/Prof/other	
Surname		
Forenames		
Date of birth		
Relationship to you		
Usual residential address		
Contact details	Home telephone	
	Mobile telephone	
	Office telephone	
	Email address	
Occupation		
Any other notes		

Attorney 2	
Title	Mr/Mrs/Miss/Ms/Dr/Prof/other
Surname	
Forenames	
Date of birth	
Relationship to you	
Usual residential address	
Contact details	Home telephone
	Mobile telephone
	Office telephone
	Email address
Occupation	
Any other notes	

Appointment: (please only choose one option)	Joint <input type="checkbox"/>	Joint & several <input type="checkbox"/>
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7. Attorney(s)

Please complete the following as comprehensively as possible.

Attorney 3		Each other <input type="checkbox"/>
Title	Mr/Mrs/Miss/Ms/Dr/Prof/other	
Surname		
Forenames		
Date of birth		
Relationship to you		
Usual residential address		
	Postcode	
Contact details	Home telephone	
	Mobile telephone	
	Office telephone	
	Email address	
Occupation		
Any other notes		

Attorney 4	
Title	Mr/Mrs/Miss/Ms/Dr/Prof/other
Surname	
Forenames	
Date of birth	
Relationship to you	
Usual residential address	
	Postcode
Contact details	Home telephone
	Mobile telephone
	Office telephone
	Email address
Occupation	
Any other notes	

Appointment: (please only choose one option)	Joint <input type="checkbox"/>	Joint & several <input type="checkbox"/>
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8. Replacement Attorney(s)

Please complete the following as comprehensively as possible.

Replacement Attorney 1	
Title	Mr/Mrs/Miss/Ms/Dr/Prof/other
Surname	
Forenames	
Date of birth	
Relationship to you	
Usual residential address	
	Postcode
Contact details	Home telephone
	Mobile telephone
	Office telephone
	Email address
Occupation	
Any other notes	

Replacement Attorney 2	
Title	Mr/Mrs/Miss/Ms/Dr/Prof/other
Surname	
Forenames	
Date of birth	
Relationship to you	
Usual residential address	
	Postcode
Contact details	Home telephone
	Mobile telephone
	Office telephone
	Email address
Occupation	
Any other notes	

Appointment:
(please only choose **one** option)

Joint

Joint & several

8. Replacement Attorney(s)

Please complete the following as comprehensively as possible.

Replacement Attorney 3	
Title	Mr/Mrs/Miss/Ms/Dr/Prof/other
Surname	
Forenames	
Date of birth	
Relationship to you	
Usual residential address	
	Postcode
Contact details	Home telephone
	Mobile telephone
	Office telephone
	Email address
Occupation	
Any other notes	

Replacement Attorney 4	
Title	Mr/Mrs/Miss/Ms/Dr/Prof/other
Surname	
Forenames	
Date of birth	
Relationship to you	
Usual residential address	
	Postcode
Contact details	Home telephone
	Mobile telephone
	Office telephone
	Email address
Occupation	
Any other notes	

Appointment:
(please only choose **one** option)

Joint

Joint & several

9. Preferences

If you would like to offer your Attorney(s) any guidance in carrying out their role please note this here. Please take note of our advice at section 4 of our Factsheet.

Preferences

10. Life Sustaining Treatment

Health & Welfare LPAs ONLY:

At the time of executing the Health and Welfare LPA you will be asked to confirm whether you wish you Attorney(s) to have the authority to accept or refuse life sustaining treatment on your behalf.

Please indicate your intended authority:

- I/we DO wish to give my/our Attorney(s) authority to accept or refuse life sustaining treatment on my/our behalf
- I/we DO NOT wish to give my/our Attorney(s) authority to accept or refuse life sustaining treatment on my/our behalf

11. Registration... The Office of the Public Guardian

Your Lasting Powers of Attorney cannot be used by your Attorney(s) until they are registered at the Office of the Public Guardian. In most circumstances we recommend you register the document(s) immediately to avoid delay at the time they are required, however you should discuss this with us for tailored advice to suit your circumstances.

Please take note of the information at section 7 of our Factsheet.

Registration – when to register the documents

I **do** wish to register the documents now

I **do not** wish to register the documents now

Registration – when do you want your Attorney(s) to act?

As soon as the Lasting Power(s) of Attorney are registered

Only when I do not have mental capacity



11. Registration... The Office of the Public Guardian

Notice

As part of the registration process you can serve notice on up to five people of your choice. This is optional but if you would like to notify anybody please provide their details here:

Full name(s) & addresses

Relationship

Date of Birth

1.

2.

3.

4.

5.

What Next?

This questionnaire is a key stage in the Discovery Process for the Initial Meeting.

The questionnaire is deliberately comprehensive and we make no apologies for that. By giving us information about you to the level contained here, you are giving yourself the best opportunity of receiving the bespoke advice that your circumstances deserve.

It is our experience that having the completed questionnaire before the meeting will result in a productive Initial Meeting.

Please email a scanned copy of the completed questionnaire to

enquiries@whitehead-monckton.co.uk

Alternatively please send it to us by facsimile.

Thank you.

The Initial Meeting

If this is the first time we have acted for you, or if we haven't acted for you in the last three years, we are required to verify your identity and address. When you visit us, please produce the original of one document from each of the following two categories

**Proof of Identity
(the document MUST include a
photograph)**

- Current valid passport
- National identity card/validated
National Insurance number
- Current driving licence
- For companies – incorporation
certificate

**Proof of Address
(no more than 3 months old)**

- Utility Bill
- Council Tax bill
- Bank/Credit Card statement

Please instruct us before our meeting if this is likely to cause any problems for you.

Canterbury

Whitehead Monckton
32-33 Watling Street
Canterbury
Kent
CT1 2AN
dx 5314 Canterbury
t. 01227 643250
f. 01227 643260

Maidstone

Whitehead Monckton
5 Eclipse Park
Sittingbourne Road
Maidstone
Kent
ME14 3EN
dx 4807 Maidstone 1
t. 01622 698000
f. 01622 690050

Tenterden

Whitehead Monckton
3-4 Market Square
High Street
Tenterden
Kent
TN30 6BN
dx 39003 Tenterden
t. 01580 765722
f. 01580 765180

e. enquiries@whitehead-monckton.co.uk

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With offices in Maidstone, Tenterden and Canterbury, Whitehead Monckton has grown to be one of the largest legal practices in the county.

We balance our practice between our business and personal clients. This ensures that every single client will receive the very best advice, support and quality of work, no matter what their background, tailored to their specific needs.

Whitehead Monckton is authorised and regulated by the Solicitors Regulation Authority under no. 608279.