

WILL INSTRUCTION FORM**MIRROR WILLS**

Please read the following before completing:

1. A Mirror Will is suitable for a couple, whether married or Civil Partner, who wish to make provision for the surviving partner on the death of the first partner. This type of Will also includes provision for what will happen to each estate on the death of the second partner.
2. By completing this form you agree to our Terms and Conditions.

I confirm that I have read the Terms and Conditions on our website

These Wills are only suitable where:

**Inheritance Tax or Care Home fees are not an issue AND
You are over 18 and resident in England and Wales**

If you're combined estate exceeds £312,000.00 your could be liable to Inheritance Tax. We would recommend that you utilise our phone service to discuss the various means of Inheritance Tax mitigation available to.

A. PERSONAL INFORMATION

(a) Testators Name	
(b) Address	Postcode:
(f) Spouse/ Partner full name	

B. INFORMATION FOR YOUR WILL

<p>Executors</p> <p>(If you are appointing a surviving partner please indicate an Executor to act in substitution if they have predeceased you)</p>	<p>Executors are the person(s) appointed by you to ensure the terms of your Will are carried out and to administer your estate. Your Executors can be someone receiving gifts under your Will, such as family members. Alternatively you may wish to appoint our firm to act on your behalf to maintain independence.</p> <p><input type="checkbox"/> If you would like your Spouse/Partner to act please tick here</p> <p><input type="checkbox"/> If you would like Austin Sanders to act as Executors please tick here</p> <p>Alternatively (or in substitution) please complete their details below</p>
<p>(You can appoint between 1 and 4 Executors to act on your behalf)</p>	<p>Name:</p> <p>Address:</p> <p>Name:</p> <p>Address:</p> <p>Name:</p> <p>Address:</p> <p>Name:</p> <p>Address:</p>
<p>Guardians</p>	<p>Should you wish to appoint Guardians for any minor children please complete their details:</p> <p>Name(s):</p> <p>Address:</p> <p>If your chosen guardian(s) predecease you would you like to appoint an alternative?</p>

	Name(s): Address:
Funeral requests You: Your Partner:	If you wish to have your funeral held at a specific Church or Crematorium followed by burial or cremation please indicate here:
Any person(s) you DO NOT wish to benefit from your Will?	

C GIFTS UNDER YOUR WILL

(1) Specific Gifts of Money / Specific Items

Gift / Amount	Full Name (and Address if not previously given)	Substituted recipient if intended Beneficiary predeceases you e.g their children

(2) Residual Estate

Any item or amount not specifically left will form part of your residual estate. As the exact size of an estate at the date the Will comes into force is unknown it is usual to make provision for this to pass to either 1 person, such as a surviving spouse or child, or be divided into proportions of your choosing. (If you would like the nominated person(s) children to acquire the share if they predecease you please indicate by ticking the last column)

- *Surviving Spouse / Partner / Fiancé*

If you would like your Residual Estate to pass to your surviving Spouse / Partner tick here

Please indicate below how you would like your estate to be distributed if not entirely to a surviving Spouse / Partner or in the scenario he/she has predeceased you:

	Proportion (%)	Full name and Address (unless previously stated)	Relationship to you (if any)	Age	Children in substitution
(1)					
(2)					
(3)					
(4)					

Please Confirm any that are applicable:

- You would like your Wills Professionally bound
- You would prefer your Wills emailing for you to print out.
- You would like us to store your Wills.
- You would like ___ additional copies of both wills.

D. MIRROR WILL INSTRUCTIONS

Is the Spouse / Civil Partners Will is to be exactly the same as the first Testators Will in regards to Executors, Gifts and Residuary Estate with the reversal of the Spouse / Civil Partner? (Please Indicate)

YES	YES with additional gifts	NO
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- If you have indicated YES you may leave the remainder of this form.
- If YES with additional specific gifts of monies or items please indicate the additional gifts the second Testator wishes to include under their Will in the Additional Gifts section.
- If you have indicated NO and the Testators intend their Wills to considerably vary please complete a new form for each Testator.

E. ADDITIONAL GIFTS OF SECOND TESTATOR

Gift / Amount	Full Name (and Address if not previously given)	Substituted recipient if intended Beneficiary predeceases you

Amendments to Residual Estate

	Proportion (%)	Full name and Address (unless previously stated)	Relationship to you (if any)	Age	Children in substitution
(1)					
(2)					
(3)					