

# Law Offices of Nancy Weissman

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ESTATE ADMINISTRATION QUESTIONNAIRE  
Please add additional pages as necessary

DATE PREPARED: \_\_\_\_\_

PREPARED BY: \_\_\_\_\_

Decedent's name \_\_\_\_\_

Date of death \_\_\_\_\_

Decedent's address at time of death \_\_\_\_\_

Decedent's date and place of birth \_\_\_\_\_

Decedent's father's name \_\_\_\_\_

Decedent's mother's **maiden** name \_\_\_\_\_

Name and address of decedent's physician \_\_\_\_\_

Decedent's occupation \_\_\_\_\_

Retired? Yes \_\_\_\_\_

No \_\_\_\_\_ Employer \_\_\_\_\_

Was decedent married at the time of death? Yes \_\_\_\_\_ No \_\_\_\_\_

Surviving spouse's name \_\_\_\_\_

Surviving \_\_\_\_\_ spouse's \_\_\_\_\_ date \_\_\_\_\_ of \_\_\_\_\_ birth  
\_\_\_\_\_

If decedent was a widow or widower, please list name and date of death of the deceased spouse:

Name: \_\_\_\_\_ Date of Death: \_\_\_\_\_

### **HEIRS**

Please list the decedent's child(ren) and grandchild(ren), parents, and siblings.  
Mark "deceased" as appropriate.

<b>Name</b>	<b>Address and telephone number</b>	<b>Relationship</b>
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### **BENEFICIARIES**

Please list everyone (including charities) named in the will.  
Mark "deceased" as appropriate.

<b>Name</b>	<b>Address and telephone number</b>	<b>Relationship</b>
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### REAL ESTATE

\_\_\_\_\_ Check here if decedent did not own real estate and leave the rest of this section blank.

Please list all real estate in Massachusetts held by the decedent **alone or with any other person.**

<b>Property address</b>	<b>Names of owner(s)</b>	<b>Mortgage balance</b>	<b>Estimated value at date of death</b>
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Is any real estate under agreement for sale? Yes \_\_\_\_\_ No \_\_\_\_\_  
Did decedent transfer any real estate within the three years prior to death? Yes \_\_\_\_\_ No \_\_\_\_\_

### TANGIBLE PROPERTY

Please list tangible property (jewelry, art work, musical instruments, cars, firearms, computers, household items, etc.) held by the **decedent alone or jointly with any other person.**

<b>Description of property</b>	<b>Owner(s)</b>	<b>Estimated value at date of death</b>	<b>In Massachusetts?</b>
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### **BANK AND INVESTMENT ACCOUNTS**

Please list all bank accounts held by the decedent **alone or jointly with any other person**. Include certificates of deposit, Individual Retirement Accounts, annuities, etc. For each account, enclose a copy of the most recent statement prior to the date of death.

<b>Name of bank and account number</b>	<b>Type of account (savings, checking, certificate of deposit, etc.)</b>	<b>Names of owner(s)</b>	<b>Balance as of date of death</b>
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☐ Indicate if any account is a retirement account, such as a 401k, IRA, 403b, etc.

### **INCOME, MORTGAGES, NOTES**

Please list any income that the decedent received from salary, commissions, mortgages or notes.

<b>Name of payor</b>	<b>Amount payment</b>	<b>and frequency</b>	<b>of</b>	<b>Estimated balance due at date of death</b>
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### **LIFE INSURANCE**

Please list life insurance policies and numbers with amounts received. If you have received a Form 712 from the insurance company, please send it to us. If not, please send us the name and address of the insurance company and we will request Form 712 for you.

<b>Insurance company &amp; policy number</b>	<b>Owner(s)</b>	<b>Beneficiaries</b>	<b>Policy amount</b>
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**OTHER MISCELLANEOUS PROPERTY**

Please list any property not listed above, such as cars, boats, coin collections. Please include a copy of the vehicle registration for cars and boats.

<b>Description of property</b>	<b>Owner(s)</b>	<b>Estimated value at date of death</b>
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\_\_\_\_ Check here if decedent was involved in litigation (law suit, bankruptcy, personal injury, divorce, etc.).

### **DEBTS OF THE DECEDENT**

Please list all debts the *decedent had at death*, including medical bills, credit card bills, utility bills, and all other creditors to whom the decedent owed money. Include all outstanding mortgages and real estate taxes owed at the time of death, bank name, account number and total amount due at the time of death. For real estate taxes, list the date due and amount due.

\_\_\_\_\_ Check here if decedent was obliged to pay child support.

\_\_\_\_\_ Check here if decedent was obliged to pay alimony.

<b>Creditor</b>	<b>Account number (if any)</b>	<b>Amount owed as of date of death</b>
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### **DEBTS OF THE ESTATE**

Please list all funeral expenses, such as flowers, catering, headstone.

<b>Type of expense</b>	<b>To whom paid</b>	<b>Amount</b>
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### **OTHER REQUESTED DOCUMENTS**

- Decedent's original will and codicils, if any
- Two original certified death certificates
- Copy of trust(s)
- Copy of the most recent account statements for banks, retirement accounts, credit cards, etc.
- Copy of the most recent estate tax bills.
- Copy of homeowner's insurance policy and riders.
- Copies of appraisals for valuable items of personal property.

#### *May also need*

- Appraisals of real estate as of the date of death.
- Copies of bills and payment records.
- Decedent's Social Security Number.
- Information on decedent's online assets (please see attached Advisory on Digital Assets).