



Edward Olkovich Law

Professional Corporation

Certified Specialist Estates and Trusts Law

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Congratulations!

You are about to invest in a lawyer-prepared will. You will receive stress-free service, security and peace of mind. We provide plain-language advice for key decisions about wills, executors, attorneys, guardians and trusts.

This guide explains our fees and how to book your appointment.

Making Wills Easy

Step 1: Download our estate planning guide with fee information to focus your thoughts. Please bring your completed guide to your first appointment. This ensures proper advice and saves time and money.

Step 2: Request your appointment. You will receive a draft will after we receive your fee deposit. Receive your free book *Estate to the Heart – How to Plan Wills and Estates for Your Loved Ones*

Step 3: Sign your will after approving your draft at your second visit. Receive a free will folder for your original will. You store your will for safekeeping.

Estate Planning

New Client Information

Edward Olkovich

Estate Planning Client Information Form

Your information is protected by solicitor-client privilege. Your information will be held in strictest confidence. You must complete this form so we can properly advise you. Please print clearly the full names of all the people you list. Complete as much of this form as possible to save time. We rely on the information you provide to give you proper advice.

1. Tell Us Who You Are
2. Personal Information
3. We Need To Know
4. Tell Us Who You Want
5. Powers of Attorney - Property and Personal Care
6. Your Assets

1. TELL US WHO YOU ARE		
Partner 1		Partner 2
	Name	
	Address	
	Email	
	Phone number	
	Occupation	
	Business Address & Phone	
<input type="checkbox"/> Drivers Licence <input type="checkbox"/> Passport <input type="checkbox"/> Birth Certificate <input type="checkbox"/> Ontario ID Card <input type="checkbox"/> Other:	Original Document Verifying Identity	<input type="checkbox"/> Drivers Licence <input type="checkbox"/> Passport <input type="checkbox"/> Birth Certificate <input type="checkbox"/> Ontario ID Card <input type="checkbox"/> Other:
	Meeting & Date Identity Verified	
Edward Olkovich	Name of Lawyer	Edward Olkovich

2. PERSONAL INFORMATION

Enter your full name including any middle names/other names you are known by.

Partner 1

Partner 2

Partner 1		Partner 2
	Date of Birth	
	Citizenship	
	Telephone	
	Mobile	
	Email	
<input type="checkbox"/> Married <input type="checkbox"/> Divorced <input type="checkbox"/> Separated <input type="checkbox"/> Common-law <input type="checkbox"/> Single <input type="checkbox"/> Widowed	Marital Status	<input type="checkbox"/> Married <input type="checkbox"/> Divorced <input type="checkbox"/> Separated <input type="checkbox"/> Common-law <input type="checkbox"/> Single <input type="checkbox"/> Widowed

3. WE NEED TO KNOW

How did you hear about us?
 Internet Event/Seminar Neighbourhood Radio Television Ad
 Law Society of Ontario Referred by Other

Please let us know if you or your partner:	Yes / No	Details
1) Have been married before?	<input type="checkbox"/> <input type="checkbox"/>
2) Jointly own your own home?	<input type="checkbox"/> <input type="checkbox"/>
3) Own a business?	<input type="checkbox"/> <input type="checkbox"/>
4) Own real estate other than your own home?	<input type="checkbox"/> <input type="checkbox"/>
5) Own assets outside Ontario?	<input type="checkbox"/> <input type="checkbox"/>
6) Have a marriage contract / separation agreement?	<input type="checkbox"/> <input type="checkbox"/>
7) Have been hospitalized / diagnosed with an illness?	<input type="checkbox"/> <input type="checkbox"/>
8) Have assets with designated beneficiaries?	<input type="checkbox"/> <input type="checkbox"/>
9) Have children or beneficiaries with special needs?	<input type="checkbox"/> <input type="checkbox"/>
10) Plan to be married in the next year?	<input type="checkbox"/> <input type="checkbox"/>
11) Already have a will?	<input type="checkbox"/> <input type="checkbox"/>
12) Know anyone with a claim to your estate?	<input type="checkbox"/> <input type="checkbox"/>
13) Own assets jointly with someone?	<input type="checkbox"/> <input type="checkbox"/>
14) Intend to make a large gift outside of your will?	<input type="checkbox"/> <input type="checkbox"/>
15) Know of anyone who may challenge your will?	<input type="checkbox"/> <input type="checkbox"/>

4. TELL US WHO YOU WANT

A. Executor / Estate Trustee

An **executor/ estate trustee** pays your bills and distributes gifts under your will. Are you appointing each other as executors? Yes No
 If anything were to happen to either one of you, who would you then appoint?

My Choice			Partner's Choice		
Name	Relationship	Birthdate	Name	Relationship	Birthdate
Backup Executor(s)			Backup Executor(s)		

B. Beneficiaries – Who Gets Everything?

Your **beneficiaries** share your estate. Are you naming the same **beneficiaries**? Yes No

My Choice			Partner's Choice		
Name	Relationship	Birthdate	Name	Relationship	Birthdate

C. Guardians

Your **guardian** handles the needs of those without full legal capacity, such as minor children. Are you naming the same **guardians**? Yes No

My Choice			Partner's Choice		
Name	Relationship	Birthdate	Name	Relationship	Birthdate
Backup(s)			Backup(s)		

5. POWERS OF ATTORNEY – PROPERTY & PERSONAL CARE

An **attorney** is an agent or substitute decision maker you designate in a signed and witnessed legal document. Are you appointing each other as attorneys? Yes No
 If anything were to happen to either one of you, who would you then appoint?

My Choice			Partner's Choice		
Power of Attorney for Property			Power of Attorney for Property		
Name	Relationship	Birthdate	Name	Relationship	Birthdate
Backup(s)			Backup(s)		
My Choice			Partner's Choice		
Power of Attorney for Personal Care			Power of Attorney for Personal Care		
Name	Relationship	Birthdate	Name	Relationship	Birthdate
Backup(s)			Backup(s)		

Please identify any concerns you wish to cover during our meeting.

6. YOUR ASSETS			
Asset	Joint Asset	Designated Asset	Will Asset
1. Real estate			
2. Life insurance			
3. Pensions			
4. Investments (registered or other)			
5. Bank accounts			
6. Business interests			
7. Personal items (cars, art, collectables)			
YOUR APPROXIMATE NET ESTATE			
Total Assets – Total Liabilities = \$			

Please be prepared to discuss assets and liabilities at our meeting:

- Real estate – your home(s), vacation/rental property, land
- Bank accounts – GICs, TFSAs, investments
- Retirement accounts – RRSPs, RRIFs, pensions
- Business ownership/interests
- Personal items – cars, art, jewelry, collectables
- Life Insurance
- Mortgage(s), consumer debt, unsecured credit, promissory notes