

WILL APPLICATION

UNIVERSITY OF HAWAII ELDER LAW PROGRAM (UHELP) INCLUDING ELDER LAW CLINIC



Please fill out information, sign and return application to:

University of Hawaii Elder Law Program (UHELP)
William S. Richardson School of Law
2515 Dole Street
Honolulu, Hawaii 96822
Tel: (808) 956-6544

After your application is received and if it is approved by our attorney, we will draft a will and send it to you for your review. There may be some delay in processing your application due to the number of requests UHELP receives for assistance. If there are no corrections or revisions, you will then call our office to make an appointment to discuss the will and have it signed witnessed and notarized. Please call UHELP at 956-6544 if you have any questions about the application.

Name: _____
(Last) *(First)* *(Middle)*

WILL DRAFTING APPLICATION, QUESTIONNAIRE, AND RETAINER

You are applying to have a will prepared for you. The will is to be drafted from the information you provide, and will be of a relatively simple, uncomplicated nature.

Please complete all the pages of this questionnaire to assist in an analysis of your estate. If the space provided is inadequate, please finish answering the questions on a separate sheet of paper and attach it to the questionnaire. The information you provide will be treated as legally privileged and confidential.

Please print clearly. If you have any questions, please contact the UHELP office at 956-6544.

NOTE: Due to staffing limitations and potential disadvantages of probate, the following limitations have been set by the project and funding sources to ensure that services are provided to the most socially and economically needy elders in our community. The following are current guidelines for resources:

Applicant's income from all sources is less than \$75,000 per year.

Assets do not exceed \$100,000. UHELP does not prepare wills for individuals who own real property, including any interest in homes/condominiums or land.

Unfortunately, due to the large number of applications for services and the requirements of the case acceptance process, there may be a waiting period before you hear from us.

Persons wishing to avoid probate should consider alternatives, including the use of living trusts. (See definitions on last page).

A. GENERAL INFORMATION

Full name: _____
(Last) (First) (Middle)

Other names you have been known by: _____

(Address) (Apt.) (City) (State) (Zip code)

(Home phone) (Cell phone) (E-mail)

Birth date: _____ / _____ / _____ (Month/Day/Year)

Are you a veteran? Yes No _____
(Branch of service and dates of service)

Your present status: _____
(Single, married, civil union, reciprocal beneficiary, widowed, separated, divorced, marriage annulled, etc.)

Name of your spouse/partner, etc: _____

Name(s) of former spouse (s)/partner(s), etc: _____

B. FINANCIAL INFORMATION/PROPERTY OWNERSHIP

Total **annual** income from **all** sources (amount per year): \$_____

Do you own a home/condominium or have any other interest in real property? Yes No

Approximate total value of all monetary assets: \$_____
(Stocks, bonds, bank, savings/loan, credit union accounts, certificates of deposit, etc.)

Other personal property (list approximate value):

Motor vehicles \$_____

Jewelry / Household goods \$_____

C. FAMILY INFORMATION

Children (In "Comments" section, indicate if a child is a natural child, adopted child, stepchild, deceased child, or "hanai" child) NOTE: List all children even if they are not to receive anything through a will, etc.

Child's Full Name Full Address Age

1. _____

2. _____

- 3. _____
- 4. _____
- 5. _____
- 6. _____
- 7. _____
- 8. _____

Add Pages as Necessary

PRIOR WILLS

Have you ever made a will before? Yes No If Yes, where is it now? _____

D. PLAN FOR DISPOSITION OF YOUR ESTATE

(Check applicable boxes and fill in appropriate information)

Do you wish to specifically disinherit anyone (or not provide for anyone)? Yes No

If Yes, name of person you wish to disinherit (or not provide for): _____

To whom do you wish to leave your property when you die? *(Name(s) and address(es))*

If the person(s) named above does not survive you, then to whom do you wish to leave your property?
(Name(s) and address(es))

If one or more of these persons do not survive you, then to whom do you want to leave your property?

Other persons, charities, organizations, etc:

OTHER MATTERS

Comments or questions to ask attorney:
(E.G. If you wish to provide for a different manner of distribution of your property)

E. PERSONAL REPRESENTATIVE

The Personal Representative (PR) is responsible for the management and distribution of your assets and, if you desire, you can grant your PR the authority to carry out your instructions for the disposition of your body. The selection of a PR is a matter for the personal decision of the estate owner. Choices for PR may include a spouse, adult child, adult relative, personal or business friend, attorney, bank or other corporate fiduciary. If you wish to nominate a non-resident of Hawaii, he or she will be able to serve as your PR only if he or she agrees to be subject to the Hawaii Court jurisdiction. Who would you like to nominate as Personal Representative?

Primary Personal Representative:

(Name)

(Relationship)

(Address)

Alternate Personal Representative:

(Name)

(Relationship)

(Address)

You have the power to grant your PR the authority to carry out your instructions for the disposition of your body. Do you wish to grant such authority? Yes No

(You may also execute a Written Instrument to Control Disposition of Remains. Please ask UHELP about it)

Do you have any specific instructions concerning donation of your body/organs or burial/cremation or funeral/memorial? Yes No

If yes, explain: _____

You have the authority to waive the requirement that the PR of the estate put up a bond, which secures the safe performance of his/her duties in the distribution of your estate. This bond requires a fee which is usually taken out of the estate as a cost of administration. However, if the estate is small and you know the PR well, you may desire to waive the bond. If the estate is large, a bond may be advisable.

Do you wish to waive the bond requirement? Yes No

F. Distribution of Personal Property

To provide more flexibility in distributing certain kinds of tangible personal property, such as jewelry, art collections, precious metals, personal effects, etc., you may use a written statement incorporated by reference into your will. This statement must be signed by you prior to the execution of your will. This statement can be added to, subtracted from, and otherwise changed throughout the years by you without the necessity of changing your will each time.

Do you wish to incorporate such a statement? Yes No

If Yes, write a draft statement on a separate sheet of paper.

(Again, this statement would have to be prepared and signed prior to the execution of your will)

If you do not incorporate a statement into your will, you can still write a letter to your personal representative in which you express your hopes that your PR will distribute various articles of personal property in accordance with your desires. *(See Section G)*

G. Letter to Personal Representative

You may leave a letter to your Personal Representative which will provide instructions and information that he or she might not know and will make it easier for him or her to do a thorough job of executing your estate. The letter can be used to instruct the Personal Representative on any final arrangements you may have concerning burial/cremation, ceremonies, persons to contact, etc. You may also leave any final instructions, directions, or messages you may deem appropriate.

The letter to your personal representative should be signed and dated, but does not need to be witnessed. In this letter to your personal representative you can also express your hopes that your PR will distribute certain articles of personal property in accordance with your desires. This letter can be changed at any time without the necessity of following the formal procedures involved in changing a will. It should be noted that the letter cannot supersede provisions of a valid will

Do you wish to reference this type of letter in your will? Yes No

UHELP RETAINER

I request and authorize the University of Hawaii Elder Law Program (UHELP), including the Elder Law Clinic to assist me with the preparation of a will. I understand that my application will not be accepted unless it is signed by a UHELP attorney. I understand that the UHELP program often uses volunteer lawyers and provides students with educational opportunities to learn about clients and legal issues. I understand that more than one attorney, or paralegal or student under the supervision of an attorney, may be involved

I understand and agree that, if accepted, UHELP will only assist me with the preparation of a will and that I must submit another application to UHELP before UHELP will represent me or assist me concerning another legal problem.

I understand that any will to be prepared will be of a relatively simple, uncomplicated nature and I understand that UHELP will not assume any responsibility for assisting me with the estate planning or financial planning.

I agree that UHELP will not be responsible for retaining my will in its files, and UHELP will assume no continuing responsibility to provide legal services to me after it has prepared a will for me and that it is solely my responsibility to maintain and safeguard the original of my will and to review and update it should changes in my circumstances or changes in the law occur.

I understand that UHELP will not be responsible for probating my estate.

All information supplied by me is true and accurate to the best of my knowledge.

(Signature of Applicant)

(Date)

(Signature of UHELP Attorney)

(Date)