



Tailored Entrepreneurial Solutions

SCH  **EMAN** **LAW** TM **INC**

Attorneys, Conveyancers and Notaries Public

YOUR MOST VALUED DETAILS AND INFORMATION

Note: This document does not replace your will. It should be used in conjunction with a professionally drafted will and stored with it. This document may contain sensitive or private information and should not be used without care and further should be stored at all times securely with your will.

PERSONAL DETAILS:

Within the personal details section we have included space for your details, the details of your family (spouse/children/dependents), friends and pets. Please complete as fully as possible.

	You	Spouse/Partner
Forenames		
Surname		
Date of birth		
ID number		
Address		
Email		
Married (<i>and how – in community of property or out of community of property – with or without accrual</i>)		
Location of your Will		

Your children		
Title		
Forenames		
Surnames		
Address		
Telephone number		
Cell number		
Email		

Your dependents (e.g disabled person or elderly)	

Title		
Forenames		
Surnames		
Address		
Telephone number		
Cell number		
Email		

Your parents		
Title		
Forenames		
Surnames		
Address		
Telephone number		
Cell number		
Email		

Your other close family		
Title		
Forenames		
Surnames		
Address		
Telephone number		
Cell number		
Email		

Your close friends		
Title		

Forenames		
Surnames		
Address		
Telephone number		
Cell number		
Email		

Your pets		
Name		
Type/Breed/Age		
Special needs		
Name of Vet		
Telephone number		
Your Wishes in Case of Emergency		

POSSESSIONS/ ASSETS:

List your home and other property, including any offshore property and assets, motor vehicles, as well as significant possessions and valuables such as jewellery, art and antiques.

Possessions	
Property 1	
Address	
Title deeds held by	
Property 2	
Address	
Title deeds held by	
Motor Vehicle	
Motor Vehicle 1	
Motor Vehicle 2	

Other assets of value (personal or miscellaneous)	
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FINANCIAL DETAILS:

Within the financial details section we have included space for the details of your investments, insurance policies and retirement provisions.

Bank Account details	
Bank	
Type of account	
Balance	
Bank	
Type of account	
Balance	
Bank	
Type of account	
Balance	

Shares/Portfolios/Unit Trust	Shares 1	Shares 2	Shares 3	Shares 4
Investment Company				
Broker				
Contact details				
Location of documents				

	Insurance Policies	Home/contents	Building	Motor	Motor breakdown/AA
Organisation					
Broker					
Policy No.					
Location of documents					
Telephone number					

Renewal date					
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Pension Information	
Pension / Provident Fund-Beneficiaries	
Retirement Annuity 1	
Organisation	
Broker	
Documents located	
Telephone number	
Retirement Annuity 2	
Organisation	
Documents located	
Telephone number	
Pension/Provident Fund	

HEALTH

Important information regarding your medical or health conditions.

Details of any illness or drugs that might affect emergency treatment		
Do you have a PaceMaker?	Yes	No
Do you carry an Organ Donor card?	Yes	No
Do you have a health condition?	Yes	No
Medicines you are taking?		
Where do you keep them?		
Allergies or allergic reactions to medication?		

Your Doctor	
Name	
Phone number	
Medical Aid	
Company name and Scheme	

Membership number/ card location	
Contact details	
Gap cover	

IMPORTANT CONTACTS

Important contacts should be listed here.

Employer			
Business Partner			
Work contacts			
Attorney			
Accountant			
Executors/Trustees			
Spiritual leader			
Other persons			

COMPUTER AND IMPORTANT LOGINS / PASSWORDS:

Description / Device	Username	Password

Disclaimer: although every care is taken in the compilation of this document. We cannot exercise any control over how the end user chooses to use and apply it. As such we do not accept any responsibility for the loss or damage that may be occasioned as a result of the reliance by any person on the information contained herein.

Whatever your legal need,
we look forward to being part of
a continued journey with you!

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