

SUCCESSION INFORMATION FORM

Information About the Decedent

Full Legal Name _____

Address at the Time of death _____

Date of Death _____

Social Security Number _____

Marital Status (Circle one. If Decedent was married more than once, attach a full marital history.)

Single Married Divorced Widowed If divorced, date of divorce: _____

If widowed, date of spouse's death: _____

Had Decedent executed a will? Yes _____ No _____

If yes, do you have the original? Yes _____ No _____

Spouse Information (If married to Decedent at the time of Decedent's death)

Full Legal Name (Including maiden name) _____

Address at the time of Decedent's Death _____

Social Security Number _____ Date of Birth _____

Real Estate

Address of Property	Value of Property	Value of Decedent's Share
1. _____		
2. _____		
3. _____		
4. _____		
5. _____		

P· 504·212·3440 • F· 504·324·0936

101 W. Robert E. Lee Blvd, Suite 404 • New Orleans, LA 70124·2560

Vehicles

Year, Make & Model	VIN #	Value of Vehicle	Value of Decedent's Share

Bank Accounts

Bank Name	Account #	Balance	Decedent's Share of Balance

Other Property(ex. Stocks, bonds, mutual funds, mineral leases, valuable jewelry, or works of art)

Description & Details	Balance Value	Decedent's share of Balance/Value

Funeral & Burial Expenses

List all expenses incurred in connection with the Decedent's funeral and burial.
If the Decedent had pre-paid funeral expenses, please note.

Provider	Amount Paid	Pre-paid by Decedent?
		Yes ___ No ___
		Yes ___ No ___
		Yes ___ No ___

Mortgages and Other Secured Debts

Creditor	Property Mortgaged or Encumbered	Decedent's Share of Balance Owed
Name: Account#		
Name: Account#		
Name: Account#		
Name: Account#		

Unsecured Debts

Creditor	Account Number	Decedent's Share of Balance Owed
Name: Account#		
Name: Account#		
Name: Account#		
Name: Account#		
Name: Account#		

Miscellaneous Questions

Did the Decedent have any Contingent Liabilities, such as a guaranty for the debt of another person?
 Yes _____ No _____

Did the Decedent own a business or was the Decedent a partner in a business? Yes _____ No _____

Did the Decedent have life insurance, annuities, or retirement benefits which named a beneficiary who is deceased? Yes _____ No _____

Is the Decedent an heir of someone for whom a succession has not yet been completed?
 Yes _____ No _____



Heirs

Name		
Address		
SS#	Date of Birth	Relationship to Decedent

Name		
Address		
SS#	Date of Birth	Relationship to Decedent

Name		
Address		
SS#	Date of Birth	Relationship to Decedent

Name		
Address		
SS#	Date of Birth	Relationship to Decedent



Heirs (cont'd)

Name		
Address		
SS#	Date of Birth	Relationship to Decedent

Name		
Address		
SS#	Date of Birth	Relationship to Decedent

Name		
Address		
SS#	Date of Birth	Relationship to Decedent

Name		
Address		
SS#	Date of Birth	Relationship to Decedent