

**PROBATE INITIAL INTERVIEW SHEET**

1. Date: \_\_\_\_\_

2. DECEDENT INFORMATION:

Name: \_\_\_\_\_

a/k/a \_\_\_\_\_

Address \_\_\_\_\_

Social Security No. \_\_\_\_\_

Age \_\_\_\_\_

Date of Death \_\_\_\_\_

Place of Death \_\_\_\_\_

Florida Resident ( ) yes ( )no

3. PERSONAL REPRESENTATIVE:

Name \_\_\_\_\_

Address \_\_\_\_\_

Telephone: (h) \_\_\_\_\_

(w) \_\_\_\_\_

Social Security No. \_\_\_\_\_

Date of Birth \_\_\_\_\_

4. BENEFICIARIES:

A. Name \_\_\_\_\_

Address \_\_\_\_\_

Telephone (h) \_\_\_\_\_ / (w) \_\_\_\_\_

Social Security No. \_\_\_\_\_

Date of Birth \_\_\_\_\_

B. Name \_\_\_\_\_

Address \_\_\_\_\_  
\_\_\_\_\_

Telephone (h) \_\_\_\_\_ / (w) \_\_\_\_\_

Social Security No. \_\_\_\_\_

Date of Birth \_\_\_\_\_

C. Name \_\_\_\_\_

Address \_\_\_\_\_  
\_\_\_\_\_

Telephone (h) \_\_\_\_\_ / (w) \_\_\_\_\_

Social Security No. \_\_\_\_\_

Date of Birth \_\_\_\_\_

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5. ASSETS:

A. Real Property \_\_\_\_\_

Legal Description \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Parcel No. \_\_\_\_\_

Title Policy \_\_\_\_\_

Homestead ( ) yes ( ) no

Approx. FMV \_\_\_\_\_

B. Bank/Credit Union Accounts:

i. Bank \_\_\_\_\_

Telephone \_\_\_\_\_

Acct. No. \_\_\_\_\_

ii. Bank \_\_\_\_\_

Telephone \_\_\_\_\_

Acct. No. \_\_\_\_\_

iii. Bank \_\_\_\_\_

Telephone \_\_\_\_\_

Acct. No. \_\_\_\_\_

iv. Bank \_\_\_\_\_

Telephone \_\_\_\_\_

Acct. No. \_\_\_\_\_

C. Stocks and Bonds/Mutual Funds/Investments:

Name \_\_\_\_\_

Cusip or cert. # \_\_\_\_\_

Broker or contact agent \_\_\_\_\_

Name \_\_\_\_\_

Cusip or cert. # \_\_\_\_\_

Broker or contact agent \_\_\_\_\_

Name \_\_\_\_\_

Cusip or cert. # \_\_\_\_\_

Broker of contact agent \_\_\_\_\_

D. Life Insurance/Annuities/IRA's

Name \_\_\_\_\_

Address \_\_\_\_\_

Account \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

Account \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

Account \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

Account \_\_\_\_\_

E. Vehicles:

Type of Vehicle \_\_\_\_\_

VIN # \_\_\_\_\_

Lien \_\_\_\_\_

Owner/Title \_\_\_\_\_

Type of Vehicle \_\_\_\_\_

VIN # \_\_\_\_\_

Lien \_\_\_\_\_

Owner/Title \_\_\_\_\_

F. Personal Property:

Safe Deposit Box \_\_\_\_\_  
Bank location \_\_\_\_\_  
Furnishings \_\_\_\_\_

\_\_\_\_\_

Collections \_\_\_\_\_  
Other (boats, jewelry, antiques, etc.) \_\_\_\_\_

Safe Deposit Box \_\_\_\_\_  
Bank location \_\_\_\_\_  
Furnishings \_\_\_\_\_

\_\_\_\_\_

Collections \_\_\_\_\_  
Other (boats, jewelry, antiques, etc.) \_\_\_\_\_

Safe Deposit Box \_\_\_\_\_  
Bank location \_\_\_\_\_  
Furnishings \_\_\_\_\_

\_\_\_\_\_

Collections \_\_\_\_\_  
Other (boats, jewelry, antiques, etc.) \_\_\_\_\_

6. CREDITORS

Name \_\_\_\_\_  
Address \_\_\_\_\_

\_\_\_\_\_

Amount Owed \_\_\_\_\_

Name \_\_\_\_\_  
Address \_\_\_\_\_

\_\_\_\_\_

Amount Owed \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

Amount Owed \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

Amount Owed \_\_\_\_\_

7.

Testate or Intestate \_\_\_\_\_

Last Will & Testament location \_\_\_\_\_

Self-proving \_\_\_\_\_

8.

Fees/Costs Agreement \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_