

Successions Questionnaire

Please provide the following information to the best of your ability and return either by email to rbrady@probono-no.org or by mail to:

935 Gravier Street, Suite 1340 New Orleans, LA 70112

Please read each question fully and carefully and let us know if you have any questions. It is important that this document is **completely** filled out. We cannot proceed with your case without the information contained in this questionnaire.

If you have additional information you would like to add, please feel free to include it in an email or separate piece of paper.

Please bring AN ORIGINAL COPY OF THE DECEDENT'S DEATH CERTIFICATE to our office.

	CLIENT
	Please print your name below.
	DECEDENT
	The DECEDENT is the person who has died.
Decedent's name:	
Date of death:	Day: Month: Year:
Decedent's last known address:	Street address:
	City, State:
	ZIP:
Decedent's will:	Did the decedent leave a will? YES (testate) / NO (intestate)
	Do you have a copy of the will if one exists? YES / NO If YES, please send a copy of the will to our office for review. We will need the ORIGINAL in order to file the succession.
Decedent's marital status at death:	MARRIED DIVORCED SEPARATED WIDOWED NEVER MARRIED
Decedent's spouse:	Does the decedent have a living spouse? YES / NO
Your relationship to the decedent:	



DECEDENT'S SPOUSES	
Decedent's marriages:	Name of Spouse: Did this marriage end? YES / NO If YES, how?
Please list ALL marriages.	DIVORCE Date of divorce: DEATH Date of spouse's death: If Death, was a succession performed for this spouse? YES / NO Were children born of this marriage? YES / NO Were children adopted into this marriage? YES / NO
	2. Name of Spouse: Did this marriage end? YES / NO If YES, how? DIVORCE Date of divorce: DEATH Date of spouse's death: If Death, was a succession performed for this spouse? YES / NO Were children born of this marriage? YES / NO Were children adopted into this marriage? YES / NO
	3. Name of Spouse: Did this marriage end? YES / NO If YES, how? DIVORCE Date of divorce: DEATH Date of spouse's death: If Death, was a succession performed for this spouse? YES / NO Were children born of this marriage? YES / NO Were children adopted into this marriage? YES / NO



	DECEDENT'S CHILDREN	
Decedent's children:	Did the decedent have biological or adopted children? YES / NO	
	If YES, please fill out information below. If NO, please move on to the PARENTS	and SIBLINGS
	section on page 3.	
Information for	1. Name:	
decedent's living	Address:	
children:	Date of birth:	
	2. Name:	
	Address:	
Are any of the	Date of birth:	
decedent's children	2 Names	
deceased: YES / NO	3. Name:	
If you places onton the	Address:	
If yes, please enter the information for the	Date of birth:	
deceased children	4 Name:	
below	4. Name: Address:	
Below	Date of birth:	
If more children,	5. Name:	
please see the final	Address:	
sheet with additional	Date of birth:	
blanks.		
	6. Name:	
	Address:	
	Date of birth:	
Deceased children:	Deceased child's name:	
	Was a succession performed for this child? YES/NO	
	Did the deceased child have children? YES / NO	
	If YES please list their name(s) and address(es) below:	
	Deceased child's name:	
76	Was a succession performed for this child? YES/NO	
If more children,	Did the deceased child have children? YES / NO	
please see the final sheet with additional	If YES please list their name(s) and address(es) below:	
blanks.		
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	DECEDENT'S PARENTS AND SIBILINGS
Decedent's parents:	Are the decedent's parents living? YES / NO
	If YES: Please list names and addresses: Mother: Name: Address: Father: Name: Address:
	If NO: Was a succession performed for their mother? YES/NO Was a succession performed for their father? YES/NO
	Was a succession performed for their father? YES/NO
Decedent's siblings:	Are the decedent's siblings living? YES / NO If YES: Please list their names and addresses: 1. Name: FULL / HALF sibling of the decedent. Address: 2. Name: FULL / HALF sibling of the decedent. Address: 3. Name: FULL / HALF sibling of the decedent. Address: Address:
	If NO: Was a succession performed for any siblings? YES/NO Please list any additional information:



	DECEDENT'S ASSETS	
Immovable property:	Did the decedent own any immovable property such as a house or land?	
If the decedent	YES / NO	
owned more than	If YES , please list the address of the property:	
one home, additional		
space is provided on	Street Address:	
page 6	City, State: ZIP:	
page 0		
	Was the decedent married when they bought the property? YES / NO	
	Did the decedent inherit the property through a succession? YES / NO	
	We will attempt to find the Deed or Act of Sale in Land Records. If we	
	are unable to find it in their online records, we will ask you to	
	request a copy from their office.	
Movable property:	Did the decedent own any movable property such as a bank account or vehicle?	
	YES / NO	
	If YES:	
	Please fill in the following information:	
	Flease III III the following information.	
	BANK ACCOUNT	
	Bank name:	
	Bank address:	
	Bank account number:	
If more movable	Amount of money in the account: \$	
property, please see		
the final sheet with	<u>VEHICLE</u>	
additional blanks.	Make:	
	Model:	
	Year:	
	Value: \$	
	VIN number:	
	Color:	
	Mileage: Condition: GOOD FAIR POOR	
	Condition. GOOD FAIR FOOR	
	Are there any financial instruments, such as a check, made out to the decedent or	
	to the Estate of Decedent that have not yet been cashed? YES / NO	



ADDITIONAL CHILDREN, SIBLINGS, AND PROPERTY		
Additional living children:	1. Name:	
Additional deceased children:	Deceased child's name: Was a succession performed for this child? YES / NO Did the deceased child have children? YES / NO If YES please list their name(s) and address(es) below: Deceased child's name: Was a succession performed for this child? YES/NO Did the deceased child have children? YES / NO If so please list their name(s) and address(es) below:	
Additional siblings:	1. Name: FULL / HALF sibling of the decedent. Address: 2. Name: FULL / HALF sibling of the decedent. Address:	



Additional property:	Additional immovable property:
	Please list the address:
	Street Address:
	City, State:
	ZIP:
	Additional movable property:
	BANK ACCOUNT
	Bank name:
	Bank address:
	Bank account number:
	Amount of money in the account: \$
	VEHICLE
	Make:
	Model:
	Year: Value: \$
	Ville: \$\frac{1}{2}\$ VIN number:
	Color: Mileage:
	Condition: GOOD FAIR POOR
	Condition. Good TAIK TOOK
	DECEDENT'S DEDTS
76	DECEDENT'S DEBTS
	ny of the questions below, a Pro Bono Project staff member may call you for more
•	ant that we have this information, because as an heir you will inherit both the decedent's
property as well as their	Is there a mortgage on the decedent's immovable property? YES / NO
Mortgages:	If YES, please complete the following information:
	Name of the mortgage company:
	Name of the mortgage company.
	Monthly payment:
	Monthly payment.
	Amount left to pay off:
	Turiodire leie to pay ori:
	Is this mortgage in arrears? (Is there an amount that is overdue?) YES / NO
All Other Debts:	Did the decedent have any debt besides a mortgage? YES / NO
	If YES, please fill out the information below.
Credit cards	Did Decedent have credit card debt? YES / NO
	Name on account:
	Name of lender:
	Account number:
	Amount overdue:
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Medical Debts	Did the decedent have any unpaid medical bills at the time of their death? YES/NO
	Are any of these medical expenses overdue? YES / NO
	Amount owed:
	Hospital / Institution:
Car Notes	Did the decedent have a monthly car payment? YES/NO
	Are any payments overdue? YES/NO
	Amount owed each month:
	Name of lender:
Other Loans & Debts	Have the decedent's funeral expenses been paid? YES/NO IF NO, amount owed:
	Did the decedent owe any money as the result from a lawsuit? YES/NO IF YES, amount owed:
	If there are any other debts you know of, please include them on a separate piece of paper.
FOR OFFICE USE	
ONLY	
Reviewed by:	
Date:	



Successions Information Checklist

A succession is the transfer of title to property from the decedent (the person who died) to their heirs. Successions must be executed by an attorney and are necessary to transfer the title to property, regardless of whether the decedent died testate (with a will) or intestate (without a will).

Below is a checklist of the information needed for a succession. Please start gathering the following information and documents as soon as possible. We cannot proceed with your case until we receive the necessary documents and information.

Information

	☐ The decedent's name , date of death , last known address , and marital status at the time of death.
	$\hfill\Box$ Information about all of the decedent's spouses: their name(s) and date(s) of marriage.
	☐ The names and address of all of the decedent's children . By law, we must notify all heirs to the decedent's estate that a succession is being filed. It is very important that you provide us with this information yourself, or we cannot move forward with your case. Please know that this means that we cannot call heirs on your behalf or search for them on the internet.
	\Box The status (alive or deceased) of all of the decedent's children .
	☐ If any of the decedent's children are deceased , list the names and addresses of the deceased child's children . Under Louisiana successions law, a grandchild may inherit if their parent is deceased.
	$\hfill\Box$ The address and value of the decedent's immovable property (i.e. their house).
	$\hfill\Box$ The value of the decedent's movable property (i.e., their car, boat, bank account or investment accounts.
	\Box For vehicles, you will need to provide the <u>Make, Model, Year and VIN Number</u> .
	\Box For bank accounts and other financial accounts, you will need to provide the <u>name of the financial institution</u> (i.e. Chase Bank, Regions) and <u>account number</u> .
	\Box Any and all information relating to the debts of the decedent, including but not limited to: mortgages, medical bills, credit card bills, etc.
Do	ocuments
	$\hfill\Box$ If the decedent died with a will, you will need to send a copy of the will to your attorney.
	\Box An original version of the decedent's death certificate. It is a good idea to get multiple originals of the death certificate and keep them in your records, because you may need them for other issues relating to the estate.