

# Content

This PDF document contains the following:

## **Instructions**

Clear instructions have been given on how to sign and store the Will.

## **Alerts**

The alerts, which were generated while making your Will, have been listed for your easy reference.

## **Mental Capacity Certificate Format (optional)**

Enclosed is the format of a Mental Capacity Certificate which can be signed by a medical doctor. This is relevant as sometimes Wills get contested on grounds of sanity.

## **Your Will**

You will need to print and sign the main Will document. This document contains the following sections:

1. Preamble
2. Bequests
3. Residual Bequests
4. Discharge of Loans and Liabilities
5. Guardians & Trustees
6. Executor/s
7. Confirmations
8. Closing
9. Annexures

# Instructions

Please read the following instructions carefully before executing your Will.

## Signing of the Will

1. Take a print out on A4 size paper. The Will document (PDF format) which has been mailed to you has been formatted for A4 size of paper for your convenience.
2. Make sure that the print is clear.
3. For signing and entering any information by hand, please use a pen that does not smudge. You may note that a fountain pen's ink may leave smudges.
4. It is recommended that you sign on each page in the indicated signature space at the bottom left corner.
5. Please fill in the date, month, year and location (where the Will is being signed) on the first page as well as on the signature page (before the start of the Annexures) in the spaces provided for this purpose (for example: '...on this 14<sup>th</sup> day of June, 2013 at Mumbai...').
6. You would need to sign at the end of each of the rows in which you have entered any information by hand (both on the first page and the signature page).
7. Please sign in the space indicated on the final signature page (before the start of the Annexures).
8. When you sign the Will, all the witnesses should be present.
9. Please get the witnesses to sign in the space provided for them to sign on the signature page.
10. It is recommended that you take the consent from each of the Executor/s, Guardian/s (if any) and Trustee/s (if any) prior to signing the Will, for discharging their respective roles on the Will becoming operative.

**Note:** You may wish to have the signing ceremony photographed with the witnesses and yourself together, with you holding the Will in front of you. Please print and attach this photograph to the Will in the space provided in Annexure H. You may note that this feature is optional.

## Doctor's Certificate

1. You may wish to attach a medical doctor's' Mental Capacity Certificate to your signed Will if you feel that your Will may be challenged on the grounds of sanity. A format of the Certificate is attached for your convenience.

## Registration of the Will

1. Registering a Will is **optional**. Unlike some other documents where registration is mandatory (for example, a property sale agreement), getting a Will registered is **not mandatory**.
2. If you register a Will, please remember that all subsequent Wills (or codicils) that you make would also need to be registered. Similarly, if you have a prior Will that was registered, this Will would also need to be registered.
3. Please note that registration of a Will does not prevent: (a) anyone from challenging the Will, (b) probate, if the Will needs to be probated.
4. Although registration of the Will is optional, in practice certain statutory bodies or public authorities could treat registered Wills differently (and at times more favourably) as compared to unregistered Wills.

## Storing the Will

1. You should store your Will at a safe and secure place.
2. It is recommended your executor/s and/or your key beneficiaries be aware of the location of the Will and be in a position to retrieve it when required.

# Alerts

Alert	Direction
<p><i>[Name of asset]</i> is singly held with no nomination.</p>	<p>Since this asset is singly held, it is highly desirable to have nominee/s for this asset.</p>
<p>Loan <i>[Name and details of liability]</i> is not insured.</p>	<p>It is highly desirable to insure any liability such that your beneficiaries do not face problems discharging the liability after your death.</p>
<p><i>[Name of asset]</i> has been marked for discharge of loan/s and/or for cash bequest/s.</p>	<p>Please ensure that the value of the asset is sufficient to cover the multiple uses for which it has been earmarked.</p>
<p>The joint holder is not the primary beneficiary for <i>[Name of asset]</i>.</p>	<p>You may wish to choose the joint owner for this asset to be the primary beneficiary.</p>
<p>The nominee is not the primary beneficiary</p>	<p>In order to minimize possible conflict, you may wish to choose the nominee for this asset to be the primary beneficiary. If you do intend for the primary beneficiary to be different, you may wish to change the nominee accordingly such that the two match.</p>

# Mental Capacity Certificate

Testator Name: *[Name of testator]*  
Date: *[Date]*  
Address: *[Address of testator]*

I, *[Doctor's name]*, located at *[Doctor's address]* having the contact number *[Doctor's telephone number]* and email address *[Doctor's email address]*.

My registration number is *[Doctor's registration number]* registered with the *[Name of the state Medical Council]* in the year *[Year of registration]*.

The history of my involvement with *[Testator name]* is from *[Start Date]* till now.

I have examined the *[Testator name]* and have found *[him/ her]* to fully understand the nature of the act of making a Will. *[Testator name]* also has a complete understanding of the extent and nature of assets owned by *[him/ her]* as well as recognition of the persons and institutions *[he/ she]* is bequeathing the assets to. *[He/ she]* understands and comprehends in totality the distribution scheme indicated by *[him/ her]*.

*[Testator name]* has exhibited no communication or comprehension problem. *[He/ she]* is in full control of *[his/ her]* mental faculties and has clearly demonstrated mental flexibility and dexterity.

*[Testator name]* has also displayed emotional stability and has demonstrated consistency and clarity while enunciating *[his/ her]* plans.

*[Testator name]* has demonstrated excellent grooming and hygiene and no signs of any problems were witnessed.

In my opinion, the patient does have sufficient mental capacity to understand the testamentary activity undertaken by *[him/ her]*.

I solemnly swear and affirm under the penalties of perjury and upon personal knowledge that the contents of this petition are true.

Doctor's signature and stamp:

Doctor: *[Doctor's name]*

Date:

~

Last Will

&

Testament

of

*[name of testator]*

~

## PREAMBLE

I, *[name of testator]*, aged *[age]* years, son of *[name of father]*, at present residing at *[address]* and having *[PAN / Passport / Aadhar Number]*, being of sound mind and memory, do hereby make and declare this to be my Last Will & Testament made this *[day]* day of *[month]*, *[year]* at *[location]*, and state as under:

I hereby revoke all wills & codicils if any heretobefore made by me as well as all former testamentary dispositions made by me. This, my Will, shall be operative after my death.

## BEQUESTS

NOW I HEREBY BEQUEATH the following movable and immovable assets of whatsoever kind and wheresoever situate, including all future assets which I may henceforth acquire, to the below mentioned primary beneficiary/ies as well the beneficiary/ies in the alternative to such primary beneficiary/ies, and wherever applicable in the proportion mentioned or the percentage allocation made against their name for the specific asset, in the manner hereinafter set out:

### Real Estate

#### **[name of primary beneficiary]**

The property, whose address is *[address of property]* jointly owned with *[name of 1<sup>st</sup> joint owner]* and *[name of 2<sup>nd</sup> joint owner]*, together with my entire right, title and interest thereto or therein absolutely and forever and further subject to the payment by the said beneficiary of all costs or charges, if any, applicable to or pertaining to the transmission of the said property or the proceeds therefrom to the said beneficiary, and lastly, subject to the payment by the said beneficiary of the outgoings, as applicable, in the required proportion with the joint owner/s.

I desire that in the event of the said beneficiary pre-deceasing me, then *[name of alternate beneficiary]* shall constitute, in the alternative, my beneficiary, to whom the above mentioned property together with my entire right, title and interest thereto or therein will be transmitted (instead of to the pre-deceased primary beneficiary or to his/her estate), and who shall accordingly constitute my legatee for such above mentioned property together with my entire right, title and interest thereto or therein, subject to all other conditions specified above being applicable to such bequest.

## Other Assets

**Primary Beneficiary: [name of primary beneficiary]**

**Alternate Beneficiary: [name of alternate beneficiary]**

*[name of primary beneficiary]*: The assets listed below together with my entire right, title and interest thereto absolutely and forever, subject to the payment by the said beneficiary of all costs or charges, if any, applicable to or pertaining to the transmission of the said assets to the said beneficiary.

1. The contents of Locker number @Locker Number@, maintained with @Locker Provider@ at @Locker Branch@ (other than any deeds, documents or papers or other valuables or contents as pertain to any bequest made elsewhere in this Will, which are to be delivered to the concerned beneficiary as soon as practicable)
2. The entire credit balance lying in my @Bank Account type@ account number @Bank Account Number@ with @Bank Name@
3. All my holdings of the units of all the mutual fund schemes managed by various asset management companies
4. My portion of the entire balance in the demat account number @Demat Number@ maintained with @Depository Participant@, held jointly with @Joint Owner List@

I desire that in the event of the said primary beneficiary pre-deceasing me, @Alt Beneficiary@ shall constitute, in the alternative, my beneficiary, to whom the abovementioned assets together with my entire right, title and interest thereto will be transmitted (instead of to the pre-deceased primary beneficiary or to his/her estate), and who shall accordingly constitute my legatee for the said assets together with my entire right, title and interest thereto, subject to all other conditions specified above being applicable to such bequest.

**Primary Beneficiaries: [names of primary beneficiaries]**

**Alternate Beneficiaries: [names of alternate beneficiaries]**

*[name of 1<sup>st</sup> primary beneficiary] (X%) and [name of 2<sup>nd</sup> primary beneficiary] (Y%)*: The assets listed below together with my entire right, title and interest thereto absolutely and forever, subject to the payment by the said beneficiaries of all costs or charges, if any, applicable to or pertaining to the transmission of the said assets to the said beneficiaries.

1. Proprietorship Concern @Business Name@ having Income Tax Permanent Account Number @Business Pan Number@  
@Manufacturer@ @Model Name@ bearing Registration Number @Registration

Number@ (@Vehicle Type@)

2. My portion of the entire @Physical Bond Or Debenture@ issued by @Physical Name Of Issuer@, being @Physical Security Type@ @Physical Type@ maturing on @Physical Maturity Date@ and bearing certificate number/s @Physical Certificate Numbers@ held jointly with @Joint Owner List@
3. The entire cash, securities or other assets held under Client Code @PMS Client Code@ of @PMS Scheme Name@ managed by @PMS Portfolio Manager@
4. The entire proceeds from the @Insurance Insurer Type@ issued by @Insurance Insurer@ bearing policy number @Insurance Policy Number@

I desire that in the event of any of the said primary beneficiaries pre-deceasing me, the alternate for each of the primary beneficiaries as specified below, shall be to whom the percentage allocation I had proposed for the said primary beneficiary from the above mentioned assets together with my entire right, title and interest thereto will be transmitted (instead of to such pre-deceased primary beneficiary or to his/her/their estate), and such alternate/s (together with other surviving primary beneficiaries, if any) shall accordingly constitute my legatees for the said assets together with my entire right, title and interest thereto, subject to all other conditions specified above being applicable to such bequest. Accordingly, the alternate beneficiary @Prim Benef is Alt Benef List@.

## CASH BEQUESTS

### 1. Cash Bequest to *[name of beneficiary]*

I desire that on this Will becoming operative, *[name of primary beneficiary]* receive a sum of Indian Rupees *[amount of cash bequest]*, net of all applicable taxes, payable by my executor/s from my *[name of asset]* or the proceeds there from.

### 2. Cash Bequest to *[name of beneficiary]*

I desire that on this Will becoming operative, *[name of primary beneficiary]* receive *[frequency of cash payment]* and until the expiry of *[period]* from the date of this Will becoming operative or the first payment being made, a sum of Indian Rupees *[amount of periodic cash bequest]*, net of all applicable taxes, payable by *[name of person]*.

## DISCHARGE OF LOANS AND LIABILITIES

### Loan

*[name of lender]* **Loan Number** *[loan number]*

There is currently a loan outstanding from *[name of lender]*, bearing Loan Account Number *[loan number]*

I hereby direct my executor/s to duly discharge the abovementioned loan by obtaining moneys from the below mentioned asset/s or their proceeds and/or obtaining such moneys from the below mentioned person/s, in the descending order of priority set out below:

*[name of person]*

*[name of asset]*

### **RESIDUAL BEQUESTS**

All of my residual right, title and interest in all properties or assets or the proceeds therefrom, not specifically dealt with or bequeathed to any person in any portion of my Will, I hereby bequeath absolutely and forever to *[name of residuary beneficiary]* subject to payment by the said residuary beneficiary of all costs or charges, if any, applicable to or pertaining to the residual estate or the proceeds therefrom and its transmission to the residuary beneficiary.

I desire that in the event of the said residuary beneficiary pre-deceasing me, then *[name of alternate beneficiary]* shall constitute my alternate beneficiary, to whom my right, title and interest in the above mentioned residual estate or the proceeds there from will be transmitted (instead of the pre-deceased residuary beneficiary or to his/her estate), and who shall accordingly constitute my legatee for such right, title and interest in the above mentioned residual estate or the proceeds therefrom subject to all other conditions specified above being applicable to such bequest.

### **EXCLUSIONS**

I, being of sound mind and memory, have intentionally omitted from making any bequeath or disposition to the following persons, for the reasons as stated against their name:

<b>Beneficiary</b>	<b>Reason</b>
<i>[name of person]</i>	<i>[reason]</i>

### **EXECUTOR/S**

I hereby appoint *[name of executor]* as the sole executor of this, my Will.

I desire that in the event of *[name of executor]* pre-deceasing me, is unwilling to act as the executor of my Will, is unable to act as the executor of my Will, or cannot continue to act as the executor of my Will, then *[name of alternate executor]* shall constitute the executor of this, my Will, subject to all other conditions specified above being applicable to such appointment.

### **Directions to executor/s**

I direct my executor/s to:

1. Duly discharge all my wishes and directions set out in this, my Will.

2. **Priority in discharge of debts & liabilities:** Duly pay and discharge all my debts and liabilities, in the order of priority set out below, and from the sources of such discharge, if any noted in this, my Will:

a. First, towards Funeral expenses, according to the degree and quality that befits my status, and the death-bed charges (including fees for medical attendance, and board and lodging for one month prior to my death).

b. Secondly, towards the expenses of obtaining probate or letters of administration, including the costs incurred for or in respect of any judicial proceedings that may be necessary for administering the estate.

c. Thirdly, towards the wages due and outstanding for services rendered to me preceding my death by any labourer, artisan or domestic servant.

d. Fourthly, to each of my creditors, according to their respective priorities (if any) or where are secured by any asset, in accordance with my directions, if any, as to discharge of such debt. Save as aforesaid, no creditor shall have a right of priority over another. However, the executor/s shall pay all such debts (including his own), to the knowledge of the executor, equally and rateably, in accordance with my directions as to discharge from any specified source, if any, or as far as my assets will extend.

..... *[list of directions to executor]*

### **CONFIRMATIONS**

I hereby confirm that:

1. I have duly provided for in this, my Will, all my dependents or have specified my wishes and directions on how they should be taken care of or provided for.

..... *[list of confirmations]*

## **CLOSING**

In the unfortunate event that:

1. Any of the primary beneficiary/ies constituted as a legatee under this Will shall die prior to or within three months of my death, regardless of the circumstances that led to the death of such primary beneficiary/ies, it shall be conclusively presumed that such primary beneficiary/ies has predeceased me and deemed not to have survived me. Accordingly, in such event, the alternate beneficiary/ies, as specified in this Will, will constitute the legatee/s under this Will; and

2. any of the primary beneficiary/ies under this Will and his/her/their alternate/s shall die prior to or within three months of my death, regardless of the circumstances that led to the death of such primary beneficiary/ies and his/her/their alternate/s, it shall be conclusively presumed that such primary beneficiary/ies and his/her/their alternate/s have predeceased me and deemed not to have survived me. Accordingly, in such event, the further alternate beneficiary/ies, as specified in this Will, will constitute the legatee/s under this Will.

For sake of convenience and assistance to my executor/s, I have set forth in the annexures appended to this Will, the following:

Annexure A: Personal Details

Annexure B: Assets

Annexure C: Liabilities

Annexure D: Beneficiaries

Annexure E: Guardians, Trustees, Executors and Witnesses

Annexure F: Photograph of Signing of Will (optional)

IN WITNESS whereof I, *[name of testator]*, aged *[age]* years, son of *[name of father]*, at present residing at *[address]* hereby set and subscribe my hands on this *[day]* day of *[month]*, *[year]* at *[location]*.

Signature: \_\_\_\_\_

Signed by the above named *[name of testator]* in the presence of us, all present at the same time, who at his request in his presence and in the presence of each other have hereunto subscribed our names as witnesses:

Witness: *[name of 1<sup>st</sup> Witness]*

Signature: \_\_\_\_\_

Address: *[address of 1<sup>st</sup> Witness]*

Witness: *[name of 2<sup>nd</sup> Witness]*

Signature: \_\_\_\_\_

Address: *[address of 2<sup>nd</sup> Witness]*

CONFIDENTIAL

## Annexures

### **Annexure A: Personal Details**

*[personal details of testator]*

### **Annexure B: Asset Details**

*[details of all assets owned by testator]*

### **Annexure C: Liabilities**

*[details of all liabilities of the testator]*

### **Annexure D: Beneficiaries**

*[details of all beneficiaries]*

### **Annexure E: Guardians, Trustees, Executors and Witnesses**

*[details of guardians, trustees, executors and witnesses]*

### **Annexure F: Will Signing Photograph (Optional)**

*[photograph of the Will signing]*