



dartington
WEALTH MANAGEMENT

What I own, and
where I keep it





INTRODUCTION

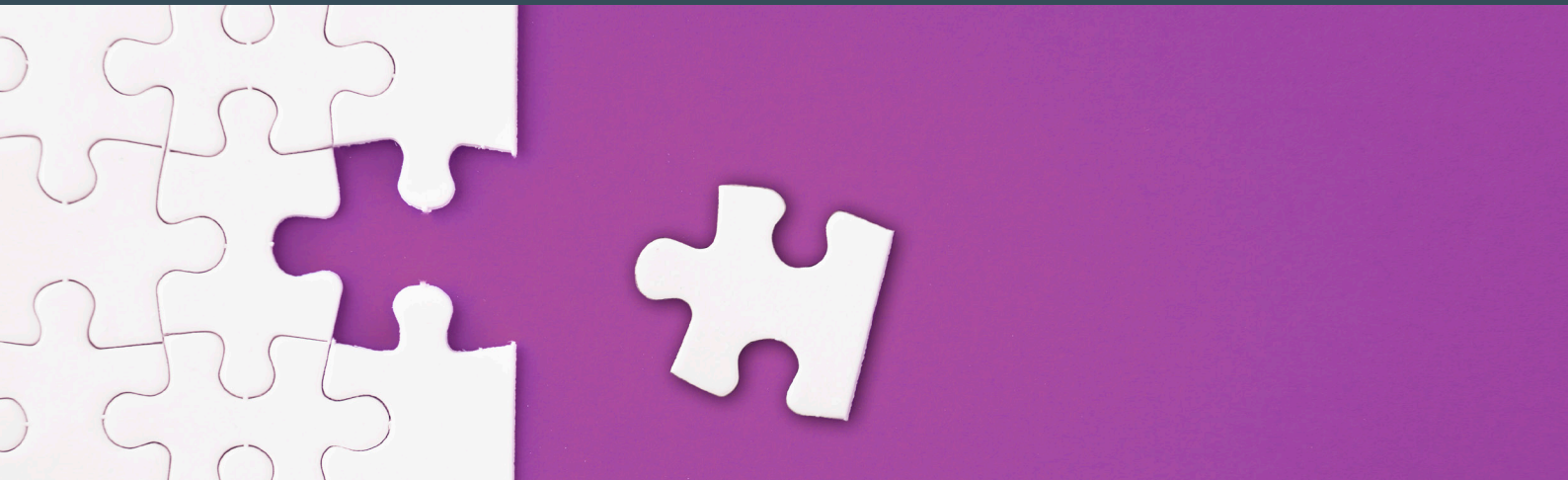
This checklist is to help you deal with your affairs should you lose mental capacity or die unexpectedly.

Also see:

[gov.uk/lasting-power-attorney-duties](https://www.gov.uk/lasting-power-attorney-duties)

[gov.uk/wills-probate-inheritance](https://www.gov.uk/wills-probate-inheritance)

citizensadvice.org.uk/family/death-and-wills/dealing-with-the-financial-affairs-of-someone-who-has-died/



PERSONAL INFORMATION

Your name: _____

Address: _____

Date of birth: _____

National Insurance no: _____

Tax reference: _____

Telephone: _____

Email: _____

Where my will is held: _____

Dated: _____

Executor 1: _____

Executor 2: _____

Medical contact: _____

Other information: [such as medical research bequests, deeds, trusts, safe box access, computer codes.](#)

Your partner's name: _____

Address: _____

Date of birth: _____

National Insurance no: _____

Tax reference: _____

Telephone: _____

Email: _____

PROFESSIONAL ADVISERS

Financial adviser / contact name: _____

Address: _____

Telephone: _____

Email: _____

Solicitor / contact name: _____

Address: _____

Telephone: _____

Email: _____

Accountant / contact name: _____

Address: _____

Contact no: _____

Email: _____

ASSETS

Investment bond/UT <small>(state provider/company name)</small>	Approx. value	Plan/Account no.	Single/Joint names

ISA/LISA/JISA <small>(state name of platform if any)</small>	Approx. value	Plan/Account no.	In whose name?

Savings & life assurances (state provider/company name)	Approx. value	Plan/Account no.	Single/Joint names

Shares (state name of company)	Approx. value	Plan/Account no.	Single/Joint names

ASSETS *(continued)*

Asset type <i>(e.g. property)</i>	Approx. value	Single/Joint names

PENSIONS

Company/provider <i>(plus name of any platform)</i>	Approx. value	Account/Plan no.	In payment Yes/No

POWERS OF ATTORNEY

For whom?	Name & address of attorneys	Registered Yes/No

TRUSTS that I am a beneficiary of & details of any inheritances received

Donor(s)	Date established	Name of trust	Copy available Yes/No

GIFTS made in the last seven years

Beneficiary/recipient	Value/type of gift	Documented Yes/No	Copy available Yes/No

Beneficiary name: _____

Beneficiary address: _____

Beneficiary telephone no: _____

Beneficiary email: _____

Beneficiary name: _____

Beneficiary address: _____

Beneficiary telephone no: _____

Beneficiary email: _____

BANK DETAILS

Bank name/address	Sort code	Account no.

CREDIT CARDS

Name of credit card company	Account no.

NOTES

MISCELLANEOUS INFORMATION e.g. organisations/clubs/charities

Name	Membership no.	Contact information

OTHER CONTACTS e.g. utilities (attach a current list of standing orders and direct debits from each bank account)

Name	Account reference	Contact information

ADDITIONAL INFORMATION e.g. where items listed in this document are stored

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OTHER DOCUMENTS

	Attached Yes/No	Dated
<ul style="list-style-type: none">● Will		
<ul style="list-style-type: none">● Power of attorney		
<ul style="list-style-type: none">● Copy of any certificates		
<ul style="list-style-type: none">● Latest valuations		
<ul style="list-style-type: none">● Record of gifts		



We're always here, if you need to talk.



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WEALTH MANAGEMENT

Dartington Wealth Management Ltd is authorised and regulated by the Financial Conduct Authority firm reference number 717593.



4 Clifton Court, Cambridge CB1 7BN

The Nexus Building, Broadway,
Letchworth Garden City, SG6 3TA.

T: 01223 211 122.

E: enquiries@dartingtonwealth.co.uk.

W: dartingtonwealth.co.uk

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