



**KP Fiduciary
Solutions**
For every stage in life

Section A: Personal Particulars

Surname _____

First names _____

Maiden name _____

Identity/Passport No _____

Date of Birth _____

Place of Birth _____

Citizenship South African

 Dual _____

 Other _____

Residential Address _____

Postal Address _____

Home telephone (____) _____

Work telephone (____) _____

Fax number (____) _____

Mobile number (____) _____

E-mail address _____

Section B: Family particulars

- Marital Status
- Single
 - Married
 - Divorced
 - Widowed

If currently married

Date of marriage _____

Spouse first name _____

Spouse maiden name _____

Spouse's ID number _____

- Type of Marriage:
- Married out of community of Property
 - ANC with accrual
 - ANC without accrual
 - Other _____

- Previously married
- No
 - Yes

- If previously married, any ongoing liability to previous spouse
(Such as maintenance)
- Yes
 - No

If Widowed

Date of death of spouse _____

Identity number of spouse _____

- Is the estate wound up
- Yes
 - No

Estate Number _____

Name of executor _____

- Did you use your full estate exemption?
- Yes
 - No
 - Don't know

Details of children and dependants

Do you have children Yes
 No

If you do have children, please provide details

First names	Surname	Id Number	Contact No
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Do you have other dependants Yes (nature) _____
 No

If you do have other dependants, please provide details

First names	Surname	Id Number	Contact No
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Do any of your children or beneficiaries have special needs? Yes
 No

Do you have a special needs trust for children/ dependants Yes
 No

Section D: Guardians for minor children

Do you have minor children Yes
 No

If so, have you nominated a guardian for minor children Yes
(Required in the event of you and your spouse dying simultaneously) No

Name of guardian _____

Your relationship with the guardian My parents
 My sibling
 A family member
 Other _____

Contact details of appointed guardian

Work telephone (____) _____

Mobile number (____) _____

E-mail address _____

Have you formally appointed the guardian, including their acceptance? Yes
 No

Have you had a detailed discussion with the guardian on real issues?
Such as finances, education, faith Yes
 No

Section E: Your financial details

Tax details

Income tax Reference No _____

Who handles your tax I do it myself
 My accountant
 A tax practitioner
 Other (specify) _____

Contact details for the person/firm handling your tax

Work telephone (____) _____

Mobile number (____) _____

E-mail address _____

Insurance advisor details

Nature of advisor Tied to life company _____
 Independent
 Don't know

Name of advisor _____

Work telephone (____) _____

Mobile number (____) _____

E-mail address _____

Safe and safe deposit boxes

Do you have a safe? Yes
 No

If so, where is the safe? _____

Who has the key/ access to the safe? _____

Work telephone (____) _____

Mobile number (____) _____

Please summarize your assets and liabilities below:

Assets

Asset	Description/ held by	Value
Primary residence		
Fixed Property		
Holiday home		
Other fixed property		
Unlisted equity		
Share portfolios		
Unit trusts		
Endowments		
Retirement portfolios		
Money market & cash		
Bonds & fixed income		
Art		
Coins		
Personal effects		
Other		
Other		

Liabilities	Description/ held by	Value
Mortgage bonds		
Credit cards		
Vehicle finance		
Term loans		
Overdraft		
Credit cards		
Store cards		
Other debt		

Tax liability

Do you know roughly what your CGT and estate duty liability will be?

- Yes
- No

Do you have adequate cash available to settle taxes and expenses

- Yes
- No
- Don't know

