

VERSOEK VIR DIE OPSTEL VAN 'N TESTAMENT / REQUEST FOR THE DRAFTING OF A WILL

Ingestuur deur / Submitted by:

Bemarker/ Marketer:

Foi (BTW uitgesluit) / Fee (excluding VAT): Merk indien van toepassing / Mark if applicable

	ORIGIN/DLR EKSEKUTEUR/EXECUTOR		ANDER / OTHER	
Single Will	R100.00/m (minimum)		R100.00/m	
Single Will	R500.00		R1000.00	
Joint Will	R100.00/m (minimum)		R120.00/m	
Joint Will	R650.00		R1200.00	
Amendments to Will	R350.00		R700.00	
Minor Amendments to Will**	GRATIS / FREE		R400.00	
Living Will	GRATIS / FREE		GRATIS / FREE	
Veilige bewaring / Safe keeping	GRATIS / FREE		R200/jaar/annum	

** Amendments must be confirmed by Lumenrock Fiduciary as minor

GESAMENTLIKE AANSOEK / JOINT APPLICATION

Afrikaans

English

TESTATEUR / TESTATOR

Van / Surname:

Volle name / Full names:

ID no:

Titel / Title: Tel no:

Adres / Address:

E-pos / e-mail:

Huwelikstaat / Marital Status: Ongetroud / Unmarried

Getroud binne gemeenskap van goed /
Married In community of property

Getroud buite gemeenskap van goed met aanwas /
Married out of community of property with accrual

Getroud buite gemeenskap van goed sonder aanwas /
Married out of community of property without accrual

Kinders (volle name, ID nommers / ouderdomme) / Children (full names, ID numbers / ages):

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TESTATRISE / TESTATRIX

Van / Surname:

Volle name / Full names:

ID no:

Titel / Title: Tel no:

Adres / Address:

E-pos / e-mail:

Huwelikstaat / Marital Status: Ongetroud / Unmarried

Getroud binne gemeenskap van goed /
 Married In community of property

Getroud buite gemeenskap van goed met aanwas /
 Married out of community of property with accrual

Getroud buite gemeenskap van goed sonder aanwas /
 Married out of community of property without accrual

Kinders (volle name, ID nommers / ouderdomme) / Children (full names, ID numbers / ages):

.....

EKSEKUTEUR / EXECUTOR

DLR Fiduciary SA (Pty) Ltd

Ja / Yes Nee / No

Ander / Other (volle name / full names):

ADDSIONELE INLIGTING / ADDITIONAL INFORMATION

Inter vivos trust / Ledebelang in BK / Aandeelhouding in maatskappy

Inter vivos trust/ members interest in CC / Shareholding in company

Inter vivos trust / Trusteevervanging / Trustee replacement

(Dui toepaslike aan en spesifiseer / Indicate whichever is applicable and specify)

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BUITELANDSE BATES / BANK REKENINGE / OFFSHORE ASSETS / BANK ACCOUNTS

Ja / Yes Nee / No

Beskrywing van bates en/of bankrekeninge (waar en waarde) / Description of assets and / or bank accounts (where and value)

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ERFGENAME / HEIRS

Langslewende gade enigste erfgenaam / Surviving spouse sole heir: Ja / Yes Nee / No

Indien nie / If not:

Verdeling van Testateur se boedel / Division of Testator's estate:

(volle name, verwantskap of identiteitsnommers van ander erfgenaam(e) en in watter verhouding / full names, relationship and identity number of other heir(s) and in which ratio)

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Verdeling van Testatrise se boedel / Division of Testatrix's estate:

(volle name, verwantskap of identiteitsnommers van ander erfgenaam(e) en in watter verhouding / full names, relationship and identity number of other heir(s) and in which ratio)

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TESTATEUR & TESTATRISSE GELYKTYDIGE AFSTERWE / TESTATOR & TESTATRIX SIMULTANEOUS DEATH:

Kinders enigste erfgenaam / Children sole heirs Ja / Yes Nee / No

Indien ja, volle name en in watter verhouding / If yes, full names and in which ratio:

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Indien nie, volle name, verwantskap of identiteitsnommers van ander erfgenaam(e) en in watter verhouding / If no, full names, relationship and identity number of other heir(s) and in which ratio:

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SUBSTITUSIE VAN ERFGENAME / SUBSTITUTION OF HEIRS

1) Afstammeling / Descendants: Ja / Yes Nee / No

2) Oorblywende erfgename / Remaining heirs: Ja / Yes Nee / No

Spesifiseer ander erfgenaam(e) / Specify other heir(s):

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**TESTAMENT BY GESINSUITWISSING / WILL IN CASE OF FAMILY OBLITERATION:
 (Testateur sterf gelyktydig met alle erfgename / Testator dies simultaneously with all heirs)**

(volle name, verwantskap of identiteitsnommers van ander erfgenaam(e) en in watter verhouding / full names, relationship and identity number of other heir(s) and in which ratio)

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Verdeling van Testatrix se boedel / Division of Testatrix's estate:

(volle name, verwantskap of identiteitsnommers van ander erfgenaam(e) en in watter verhouding / full names, relationship and identity number of other heir(s) and in which ratio)

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TESTAMENTARY TRUST / TESTAMENTÊRE TRUST

1) Enige erfgename onder 18 jaar oud / Any heirs under 18 years: Ja / Yes Nee / No

2) Indien ja, volle name, verwantskap of identiteitsnommers van minderjarige erfgename / If yes, full names, relationship and identity number of minor beneficiaries:

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3) Tot ouderdom / Until age:

TRUSTEES / TRUSTEES

DLR Fiduciary SA (Pty) Ltd

Ja / Yes

Nee / No

Ander / Other (volle name / full names):

VOOG / GUARDIAN

Volle name / Full names:

Verwantskap / Relationship:

STOFLIKE OORSKOT / MORTAL REMAINS

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ENIGE ANDER SPESIFIEKE WENSE/INLIGTING WAT ONDER DIE TESTAMENTOPSTELLER SE AANDAG GEBRING MOET WORD SOOS: / ANY OTHER WISHES/INFO YOU SPECIFICALLY WANT TO DRAW THE DRAFTER OF THE WILL'S ATTENTION TO LIKE:

CRYPTO CURRENCIES

IMPORTANT PASSWORDS

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Signature

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Date

Onroerende Eiendom / Immovable Property

Waarde / Value:

U huis(e) / Your house(s)

- (a) Erf no: R
- Area: R
- (b) Ander: R
- Other: R
- (c) Ander: R
- Other:

Roerende Eiendom / Movable Property:

Waarde / Value:

- (a) Meubels en huishoudelike toebehore /
Furniture and household effects: R
- (b) Motorvoertuig / Motor vehicle:
- (i) R
- (ii) R
- (c) Aandele / Shares:
- (i) R
- (ii) R
- (d) Polisse - wie begunstigdes is /
Policies - beneficiaries:
- (i) Polisnaam / Policy name:
Begunstigde / Beneficiary: R
- (ii) Polisnaam / Policy name:
Begunstigde / Beneficiary: R
- (iii) Polisnaam / Policy name:
Begunstigde / Beneficiary: R
- (iv) Polisnaam / Policy name:
Begunstigde / Beneficiary: R
- (e) Ander / Other:
- (i) R
- (ii) R

DEBIT ORDER AUTHORITY

Payment Method:	Once off:				Monthly:				
Payment Date if Monthly:	1st		7th		15th				
Account Holder:									
Bank Name:									
Branch Name:									
Branch Code:									
Account Number:									
Account Type:	Cheque:		Transmission:		Savings:				
<p>Authority is hereby granted to draw against my/our account when premium(s) are due for my estate planning. It is further understood and agreed that if any premium(s) is/are not paid then the agreement wrt your estate planning will be automatically cancelled. In addition this authority is effective against any party collecting premium(s) for estate planning purposes as authorised by Lumenrock Fiduciary SA. Should my/our account be transferred, this authority is also effective against any such alternative account. All estate planning agreement conditions are to apply. Premium(s) on debits may vary to reflect any change in the estate planning agreement. All debits from my/our account are to be treated as each signed personally and this instruction is to be regarded as received by my/our bankers.</p>									
I grant permission to Lumenrock Fiduciary to conduct a credit check on me:							<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; text-align: center;">Y E S</td> <td style="width: 50%; text-align: center;">N O</td> </tr> </table>	Y E S	N O
Y E S	N O								
<p>SIGNED ON THIS _____ DAY OF _____ 20____</p>									
<p>_____ SIGNATURE</p>				<p>_____ NAME OF SIGNATORY & CAPACITY (please print)</p>					