



10132 80 Avenue NW
Edmonton, Alberta
T6E 1T7

Telephone: (780) 423-3188
Facsimile: (780) 423-3187
kwong@highfieldlaw.com

PLEASE INDICATE THE DOCUMENTS YOU WISH FOR US TO PREPARE BY PUTTING AN "X" ON THE APPLICABLE LINE.

- ___ Single, Wills Only
(\$150* + disbursements[#] + GST)
- ___ Couples, Wills Only
(\$250* + disbursements[#] + GST)
- ___ Single, Package (Will, Power of Attorney, Personal Directive)
(\$275* + disbursements[#] + GST)
- ___ Couples, Package (Will, Power of Attorney, Personal Directive)
(\$375* + disbursements[#] + GST)

* Fees may be higher if you have additional requirements or work that goes above and beyond the typical instructions from a client. We will communicate any fee changes with you prior to drafting your documents.

[#] Disbursements are generally limited to printing and photocopying costs for most of our estate files. This ranges from \$5.00 for a single will to \$20.00 for a couple's package.

To ensure that your requests are properly communicated, please complete the following form as clearly as possible. Please contact our office should you require additional information or clarification. After completing the form, you may:

- E-mail the form to kwong@highfieldlaw.com,
- Fax the form to 780-423-3187,
- Drop off the form in person, or
- Mail the form to our office.

****THIS FORM IS FILLABLE ON MICROSOFT WORD/OFFICE. SIMPLY CLICK A LINE TO TYPE IN IT. IF YOU ARE USING OTHER SOFTWARE, THE DOCUMENT MAY NOT BE DISPLAYED PROPERLY.****

WILLS

*For spouses and partners, you may fill out a single form, provided that your information is substantially the same. If you have blended families and/or if **choices will be different** between the two of you, we recommend that you contact our office to discuss your situation before completing the form. Thank you.*

YOUR LEGAL NAME:

SPOUSE/PARTNER'S LEGAL NAME (if this is for you and your spouse/partner):

ADDRESS:

PHONE NUMBER(S):

EMAIL ADDRESS(ES):

PLEASE LIST YOUR EXECUTOR CHOICES BELOW.

NOTES:

- *If you are completing a couple's package and wish to choose your spouse as your first choice, please write "**EACH OTHER**" on the first line below.*
- *If you wish to have two or more people working jointly as one of your choices, please ensure that all names are listed on the same line and write "**JOINTLY**" after their names.*

1ST CHOICE: Legal name(s):

2ND (BACKUP) CHOICE, if any: Legal name(s):

3RD (BACKUP BACKUP) CHOICE, if any: Legal name(s):

*******MARRIED COUPLES: IMPORTANT!!!*******

Recent changes in Alberta laws governing estates **REQUIRE** you to choose whose Will remains in effect should both of you pass away at or around the same time. **If your wills are different, it is strongly recommended that you contact our office to discuss this.** Otherwise, if your wills are substantially similar, there should be no practical effects or issues that result from this choice.

PLEASE LIST BELOW THE NAME OF THE SPOUSE/PARTNER WHOSE WILL IS GOING TO REMAIN IN EFFECT:

_____ (list name of spouse)

WILLS continued – BENEFICIARIES

With your beneficiaries, everyone listed in each section will be given **equal shares** of your estate. If you wish to have different portions, please SPECIFY the percentage for each person. (For example: “Bob Smith – 25%, Jane Smith – 25%, Jill Smith – 50%”.)

NOTE REGARDING CHILDREN: Please note that by default, we do not name young (minor) children in the will specifically, in order to allow for some flexibility for additional children you may have after you create and execute your will. You may feel free to list the specific names, but if you do, **please clarify whether or not you want the beneficiaries to include additional “future” children or grandchildren in this will.** **IF CLARIFICATION IS NOT PROVIDED AND WE ARE REQUIRED TO AMEND THE WILL DRAFTS TO INCLUDE (OR EXCLUDE) ADDITIONAL CHILDREN OR GRANDCHILDREN, ADDITIONAL FEES MAY APPLY.**

1ST CHOICE(s): Legal name(s) and relation to you:

NOTE: If you are completing a couple’s package and wish to choose the other spouse as your first choice, you may simply say **“EACH OTHER”** in the lines below.

2ND (backup) CHOICE(s): Legal name(s) and relation to you:

3RD (backup backup) CHOICE(s): Legal name(s) and relation to you:

ASSETS, IF APPLICABLE

If assets will not be equally split between the listed beneficiaries, or if you wish to give certain items to certain people, please list the items or assets that will be going to specific beneficiaries below. **Please note that should there be an extensive list, our office reserves the right to charge extra fees.**

WILLS continued – CHILDREN

If you have children under the age of 18, please name a guardian for them should you (the parent(s)) pass away.

Who will be the GUARDIAN(s) (the one(s) taking care of your children)?

NOTE: As your children are not “property”, they are not treated as such in the will. However, a judge will give strong consideration to a parent’s choice in the will and generally will follow your wishes unless there is an extreme or unusual circumstance that forces the judge to overrule it.

Who will be the TRUSTEE (the one holding the children’s assets in trust)?

NOTES:

- You can choose the guardian listed above to be the trustee as well.
- Your guardian has access to your children’s funds/assets for costs related to raising your children. That said, if you have a separate trustee, the trustee would manage the guardian’s access to the funds.
- **Due to complications with staged releases (such as giving half of the inheritance at age 21 and the other half at age 28), we reserve the right to charge additional fees should you wish to proceed this way. This is also not recommended as it limits your children’s access to their inheritance in emergency or urgent situations, such as severe health issues.**

At what AGE will the trust fund/assets be given over to the children)?

NOTE: This is for the assets in trust. Guardianship ceases at 18 years. Typical trust ages are between 21 and 25. You are free to lower or raise the age should you wish. Please note that wills drafted by our office will instruct the trust/inheritance to be released to all children once the youngest is of the trust age.

ADDITIONAL NOTES

Should you wish to include any other relevant information, please list it below.

POWER OF ATTORNEY (POA)

If you are obtaining the full package, the first few lines below will be carried over from the wills section. **If you are not obtaining a will, please complete all sections.**

YOUR LEGAL NAME:

SPOUSE/PARTNER’S LEGAL NAME (if this is for you and your spouse/partner):

ADDRESS:

PHONE NUMBER(S):

EMAIL ADDRESS(ES):

The POA is for authority over financial matters (bank accounts, real estate transactions) while you are still alive but unable to make decisions. **If you require a Power of Attorney only for a specific property, please specify it at the end of the next page.**

PLEASE LIST YOUR ATTORNEY CHOICES BELOW.

NOTES:

- *If you are completing a couple’s package and wish to choose your spouse as your first choice, please write “**EACH OTHER**” on the first line below.*
- *If you wish to have two or more people working jointly, please ensure that all names are listed on the same line; please also write “**JOINTLY**” after their names. Please note that with joint choices, the attorneys must be in full agreement for all matters/choices.*

➤ **1ST CHOICE:** Legal name(s):

Mailing Address(es) if different from the one listed at the top of this page:

➤ **2ND (BACKUP) CHOICE, if any:** Legal name(s):

Mailing Address(es) if different from the one listed at the top of this page:

➤ **3RD (BACKUP BACKUP) CHOICE, if any:** Legal name(s):

Mailing Address(es) if different from the one listed at the top of this page:

POA continued – OPTIONS

****PLEASE READ THIS SECTION BEFORE MAKING YOUR SELECTION BELOW.****

NOTES: Powers of Attorney (POA) can start and end at different points:

- It can come into effect immediately upon signing or upon medically verified loss of mental capacity (**Springing** Power of Attorney). The Springing POA would be applicable for most people (if currently healthy with no known medical issues/concerns).
- If you choose immediate effect, it will come into effect as soon as the document is signed, and **you will lose all control over your financial matters as a result**. This would normally only be applicable for those who are ill and/or elderly and wish to transfer control right away. Please ensure that you are choosing the type that best suits your situation and circumstances.
- Also, with immediate effect, the POA can be revoked, but for many clients/cases, this would not be applicable. Please let us know if you require additional clarification.
- **Legally, there is no “ON/OFF” switch for the Power of Attorney. Once it is activated, it remains in full effect until death or, if you still have mental capacity, revocation.** On paper, it does not serve as a convenient or momentary option should you feel momentarily unwell or are temporarily unable to make financial decisions. That said, we have been advised by estate law experts that in daily life, people do use POAs in this way, especially for elderly people who are mentally well but have physical ailments or issues. **We cannot guarantee the enforceability of the POA should you use to wish to use the POA in this way. Also, this would only apply to POAs with immediate effect, as Springing POAs require loss of mental capacity regardless.**

When do you want the Power of Attorney to come into effect (mark with “X”)?

Immediately

Upon loss of mental capacity (SPRINGING POWER OF ATTORNEY)

Should you wish to include any other relevant information, please list it below.

NOTE: It was previously recommended to have multiple signed originals of the Power of Attorney due to Land Titles (Alberta Government) requirements. However, this was changed in mid-2017; the Land Titles Office will accept notarized copies for General Powers of Attorney – that is, POAs that are not for specific properties. **Originals are still required for POAs that are for specific properties; that said, for most clients, a specific listing is not required. If you wish to list specific properties for whatever reason, please notify our office before completing this form.**

PERSONAL DIRECTIVE (PD)

If you are obtaining the full package, your name(s) and address(es) will be carried over from the wills section. **If you are not obtaining a will, please complete all sections.**

YOUR LEGAL NAME:

SPOUSE/PARTNER’S LEGAL NAME (if this is for you and your spouse/partner):

ADDRESS:

PHONE NUMBER(S):

EMAIL ADDRESS(ES):

The Personal Directive is for authority over health matters, including personal care, while you are alive but unable to make your own decisions. This would include choosing or declining experimental, optional, and/or expensive treatments; this would also allow your Agent to enforce any DNR (“Do Not Resuscitate”) wishes you may have.

PLEASE LIST YOUR AGENT CHOICES BELOW.

NOTES:

- *If you are completing a couple’s package and wish to choose your spouse as your first choice, please write “**EACH OTHER**” on the first line below.*
- *If you wish to have two or more people working jointly, please ensure that all names are listed on the same line; please also write “**JOINTLY**” after their names.*

1ST CHOICE: Legal name(s):

2ND (BACKUP) CHOICE, if any: Legal name(s):

3RD (BACKUP BACKUP) CHOICE, if any: Legal name(s):

Should you wish to include any other relevant information, such as a DNR clause, please list it below.

YOU HAVE REACHED THE END OF THE FORM.

If you are ready to proceed, please:

- **E-mail the form to kwong@highfieldlaw.com,**
- **Fax the form to 780-423-3187,**
- **Drop off the form in person, or**
- **Mail the form to our office.**

Thank you!