

DOCUMENTS AND INFORMATION REQUIRED TO REPORT AN ESTATE

Please note that where the deceased and the surviving spouse were married in community of property full details need to be provided in respect of the surviving spouse's assets and liabilities.

DOCUMENT	ENCLOSED	TO FOLLOW	N/A
PERSONAL DOCUMENTS			
Original Last Will and Testament (if held by deceased)			
Original Death Certificate			
Original Identity document			
Original Marriage Certificate			
Certificate of registration of customary marriage			
Original Antenuptial Contract			
Former spouse(s)/ divorces: <input type="checkbox"/> Full names and contact details <input type="checkbox"/> Copy of Divorce Order <input type="checkbox"/> Copy of Divorce Agreement			
Predeceased spouse(s): <input type="checkbox"/> Full names <input type="checkbox"/> Copy of Death Certificate <input type="checkbox"/> Copy of Last Will and Testament <input type="checkbox"/> Copy of Liquidation & Distribution Account or Date of Death <input type="checkbox"/> Master's Office where estate was reported			
Full names of the deceased's parents			
Full names of the deceased's children (including deceased children)			
ASSETS			
Fixed properties: <input type="checkbox"/> Original Title Deeds/safe custody receipts <input type="checkbox"/> Recent home loan statements <input type="checkbox"/> Lease agreements <input type="checkbox"/> Rates account/levy statement <input type="checkbox"/> Details of any credit life cover <input type="checkbox"/> Capital gains tax valuations <input type="checkbox"/> Proof of insurance			
Motor vehicles (incl. trailers, motor bikes, caravans etc): <input type="checkbox"/> Registration certificates/ logbooks <input type="checkbox"/> Recent statement in respect of any finance <input type="checkbox"/> Proof of insurance			
Firearms: <input type="checkbox"/> Original firearm licences <input type="checkbox"/> Details of all ammunition held			
Bank accounts: <input type="checkbox"/> Cheque books <input type="checkbox"/> Recent bank statements for all accounts <input type="checkbox"/> ATM cards			
Life assurance/ endowment/annuity policies: <input type="checkbox"/> Original policy documents <input type="checkbox"/> Any endorsements/ cessions			

DOCUMENT	ENCLOSED	TO FOLLOW	N/A
Investments: <input type="checkbox"/> Unit trust statements <input type="checkbox"/> Details of any income plan/similar investments <input type="checkbox"/> Share portfolio statement <input type="checkbox"/> Computershare Investor Services shareholder statement <input type="checkbox"/> Share/stock/bond certificates			
Business interests: <input type="checkbox"/> Copy of last set of annual financial statements <input type="checkbox"/> Copy of any Partnership agreement <input type="checkbox"/> Copy of any buy and sell agreement <input type="checkbox"/> CK documents (for Close Corporations) <input type="checkbox"/> Details of the deceased's accountant/ bookkeeper <input type="checkbox"/> Share certificates <input type="checkbox"/> Details of any key man policies			
Other assets: <input type="checkbox"/> Timeshare certificates/ points statements <input type="checkbox"/> Recent levy statement <input type="checkbox"/> Loan account in inter-vivos trust <input type="checkbox"/> Acknowledgement of Debt in favour of the deceased <input type="checkbox"/> Promissory note in favour of the deceased			
LIABILITIES			
Details of: <input type="checkbox"/> Funeral expenses* <input type="checkbox"/> Medical accounts* <input type="checkbox"/> Credit cards* (including the card itself) <input type="checkbox"/> Credit Agreements* <input type="checkbox"/> Store accounts* <input type="checkbox"/> Loan accounts* <input type="checkbox"/> Cellphone account* <input type="checkbox"/> Telkom account* <input type="checkbox"/> Electricity Account* <input type="checkbox"/> Water Account* <input type="checkbox"/> Internet Service Provider* <input type="checkbox"/> Newspaper and magazine subscriptions <input type="checkbox"/> Suretyships/ guarantees by the deceased <i>*Please include a recent statement of account</i>			
TAX			
<input type="checkbox"/> Income tax reference number <input type="checkbox"/> Copy of last tax return and attachments or domicile of SARS office where deceased was registered <input type="checkbox"/> Copy of last tax assessment received <input type="checkbox"/> Details of the deceased's tax consultant <input type="checkbox"/> VAT reference no. (if applicable)			
GENERAL			
Insurance policy covering assets			
MNet/DSTV subscription			
SABC TV licence			
Employer/Pension Fund: <input type="checkbox"/> Name and address of employer/pension fund <input type="checkbox"/> Pensioner/employee number <input type="checkbox"/> Contact person			
Medical Aid: <input type="checkbox"/> Copy of recent medical aid statement <input type="checkbox"/> Reference number			
BENEFICIARIES			
Contact details including postal addresses, telephone numbers and e-mail addresses.			