

INSTRUCTION SHEET FOR YOUR WILL



Te Ture Whenua Maori Bill Succession Provisions

- Following the enactment of the Bill the succession process will change.
- The greatest change will occur for people who do not hold wills, known as intestacy.
- If a person dies intestate an eligible beneficiary/ies may apply to the Chief Executive to succeed the land interest/s. An eligible beneficiary is defined as:
 - Surviving children;
 - Surviving siblings
 - Surviving parents
 - Surviving siblings of the parents
- If there is more than one eligible beneficiary then a whanau trust must be established unless the eligible beneficiaries don't want this and if that is the case they must make application to the Maori Land Court.
- At the first stage it is a process run by the new Department and not the Maori Land Court. This is a big change as the Maori Land Court conducted thorough investigations when considering successions. We do not know how this will look in the future post the enactment of the Bill.
- The most prudent way to deal with potential succession issues is to ensure that a beneficial owner has a current will, not only for succession purposes but their estate in general. This will allow the beneficial owner the opportunity to set out exactly what is to happen to the shareholding and is the most definitive proof of those wishes.
- The difficulty is that people are complicated and a will is a
 document that must be accurate including both the content and
 the execution. The Will Instruction Form below is admittedly a full
 document but represents the level of the information required.
- The recommendation is that the Executive Office holds the forms and encourages people to complete their wills by meeting with them at the office and setting out the detail of their estate in the form. This can then be transcribed into a will and executed by the Beneficial Owner.
- The process is straightforward and results in clear instructions to the administrators of the estate.



INSTRUCTION SHEET FOR YOUR WILL

First nan							
Alias or		Surname:					
	ne(s):						
_	previous name (if applicable):						
Occupa	ation:						
Address	:						
Date of							
Any hed	alth concerns:						
Are you	currently? (Please tick)						
	Married						
	n a civil union Separated Living with another person						
	Single Divorced Other — if so, please describe relationship status						
Your hu	sband, wife, civil union partner or de facto partner's d						
Surnam							
	ne(s):						
First nar	ne(s):ation:						
First nar	ation:						
First nar Occupa Address	ation::						
First nar Occupa Address	birth:						
First nan Occupa Address Date of If marrie	birth:						
First name of the control of the con	birth:						

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Date of civil union:		
Existing property sharing or relationship property agreement?		Yes
		No
If in a de facto relationship:		
Date relationship began:		
Existing property sharing or relationship property agreement?		Yes
		No
Have you had any previous marriages, civil unions or de facto	relations	ships?
Marriages:		
		Yes No
Name of former husband/wife:		
Occupation:		
Address:		
Date of Birth:		
Date of marriage:		
Date of separation/dissolution of marriage:		
Existing separation/matrimonial or relationship property agreem	nent?	
		Yes
		No
Ongoing obligations:		
Children:		
Former husband/wife:		
Civil Unions:		
		Yes No
Name of former civil union partner:	_	_
Occupation:		
Address:		
Date of birth:		
Date of civil union:		
Date of separation/dissolution of civil union:		
Existing property sharing, relationship property or separation ag		



		Yes
		No
Ongoing obligations:		
Children:		
Former civil union partner:		
De facto relationships:		
		Yes
Name of former de facto partner:		No
Occupation:		
Address:		
Date of birth:		
Date relationship began:		
Date of relationship ended:		
Existing property sharing, relationship property or separation	agreement	Ś
		Yes
		No
Ongoing obligations:		
Children:		
Former de facto partner:		
If you are single or in a de facto relationship, are you intendimarried/enter a civil union in the near future?	ng to get	
		Yes
		No
If yes, give date set for marriage/civil union:		
If so, we can prepare your will "in contemplation of marriage will is entered into while you are not in a marriage/civil union married/enter a civil union, the will is automatically revoked marriage/civil union unless it is entered into "in contemplatio union".	and you la	ıter get
Your child/children of your husband/wife/civil union partner	/de facto p	artner
Full names and dates of birth of your children, and the children husband/wife/civil union partner/de facto partner. For your give the name of the other parent if not your present husban partner/de facto partner.	children, pl	
Child — surname:		
First name(s):		
Age:		



Parent(s):
Child — surname:
First name(s):
Age:
Parent(s):
Child — surname:
First name(s):
Age:
Parent(s):
Guardians
Do you wish to appoint guardians under your will for your infant children? If so, please state their full name, occupation and address.
Surname:
First name(s):
Occupation:
Address:
Note: A guardian is a person appointed to oversee the general welfare, maintenance and education of your children. The person you appoint to be your testamentary guardian, however, does not necessarily have custody of your children.
Do you have specific instructions for your guardians relating to:
Education:
Religion:
Making payment to guardian: (for additions to home, larger motor vehicle, etc.)
Use of your home:
If you require any further information on guardianship issues, or have any questions or ideas, please make a note to discuss this with us.
Executors
Full name, address and occupation of person or persons you wish to name as executor(s) (ie, the person(s) who would administer and distribute your estate when you die). This can be a person you wish to benefit under your will, or some other independent person such as your solicitor, or a combination of these.
Name:
Occupation:
Address:
Name:
Occupation:



Address:	
Alternative: If one or both of the an executor or dies before you:	persons named above cannot or will not o
Name:	
Occupation:	
Address:	
Do you have any interest in a trus assets that the trust currently hold	st? If so, please describe the trust and list t ls.
Description of trust:	
Name:	
Date created:	
Assets	Value
	\$
(eg, house(s))	
(eg, investments)	\$
(eg, invesiments)	\$
(eg, life policies)	
	\$
	nion partner/de facto partner, expect to receivender the wills of your parents or other relativences, including their value (if known).
Assets	Value
(a.g., b.a.u.a.(a))	\$
(eg, house(s))	¢
(eg, investments)	<u> </u>
	\$\$_
(eg, life policies)	
	\$
Please list your present assets and	d liabilities, with approximate values of ea
This will help us determine whether previously raised.	er any other advice is required on issues no
Assets	Value
(eg, house(s))	\$
(09, 110030(3))	\$
(eg, investments)	Ψ
	\$
(eg, life policies)	
	\$



(eg, chattels, such as cars or boats)	
leg, charles, soch as cars or boars)	\$
	\$ \$
Liabilities	Value
(e.g., mortgage(s))	 \$
	\$
(e.g., personal loan(s))	
(o.g. overdreffel)	\$
(e.g., overdraft(s))	ď
(e.g., hire purchase(s))	<u></u> \$
	\$
	<u> </u>
Do you own, or have any beneficial in	nterest in. Maori land?
•	an restrict how you deal with that land.
Please give as much detail as possible interest in it (if applicable).	e about the land and the nature of your
Maori land	
Detailed description	
Nature of interest	
Detailed description	
Do you wish to make any specific gifts	s of money or personal items/Taonga?
full names, addresses, relationship to y	and family heirlooms. If so, please give the vou or occupations and dates of birth of but wish to leave them. The recipient may
(eg, vehicle, ornaments)	

10.



Iten	n	To Whom
		_ Surname:
	scription	First name(s):
		Relationship/occupation:
		Date of birth:
	Do you wish to give to some per his/her lifetime only?	rson the use of your estate or part of it during
	person dies. If this applies, give	our will who will receive those assets when that the full name, address, occupation and date of of the parts of your estate that are to be left on
	Surname:	
	First name(s):	
	Relationship to you:	
	Date of birth:	
	Asset (eg, home, batch):	
		nildren) after the life tenant has died, or on and/or entered into a de facto relationship?
11.	Who is to receive the bulk of you paid and provision made for an	ur estate after the debts and gifts have been by life interest?
	Names, addresses, relationship to beneficiary/beneficiaries and the	to you (if applicable) or occupations of neir dates of birth.
	Surname:(or full name, if charity or other of First name(s):	organisation)
	Date of birth:	artner/de facto partner/children/brother/sister)

If a beneficiary dies before you, what would you like to happen to his/her share in the will?



You may simply wish for that beneficiary's share to pass into the rest of your estate, to be received by the people recorded in the previous paragraph. However, if you want that beneficiary's share to pass to someone else, please list here the names, addresses, occupations, dates of birth and relationship with substitute beneficiary/beneficiaries required.

For example, if children die before you, gift to grandchildren?		Ye: No
If someone without children dies, gift over to other recipients? Surname (or full name, if charity or other organisation:		
First name(s):		
Relationship/occupation:		
Date of birth:		
Address:		
Do any of the following circumstances apply:		
You are leaving any of your family out of your will:		
		Ye: No
You are leaving your children (or any of them) unequal shares in	n your a	ssets:
		Ye: No
You are leaving your husband, wife, civil union partner or de fact than a 50% share in property which the two of you own togethe acquired for the common use or benefit of you both:	•	
		Ye: No
If yes, please indicate which and give details of:		
the family member(s) affected; and		
your reasons for doing so, as family left out or dealt with inadequentitled to bring a claim before the court seeking a larger share		nay be

Do you have any power to appoint beneficiaries or trustees of a trust or directors

of a company under any trust, estate or other document which can be

13.

exercised under your will?



Date of trust deed: Nature of power(s): As an alternative to exercising this power under your will, you may wispecify in your will to whom you wish the power to be transferred. If give the details of that person: Do you want your executors to have power to carry on any business an interest in, or want to make any special provisions for the business (eg, name of business)	If so, please
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Nature of power(s): As an alternative to exercising this power under your will, you may will an alternative to exercising this power under your will and the same and the sam	
Date of trust deed:	
Name of trust:	
appoint trustees, beneficiaries or directors.	

15.

Yes



Surname:							
First name	s):						
Relationsh	p/occupation						
Date of bir	th:						
Which asse	ets (description):					
Do you ha	ve an earlier w	ill?					
							Y N
If so, it is a replaced.	good idea to l	et the holder	of your ed	arlier will k	now tha	t it is no	OW
Other issue	es (use this spa	ce for anythir	na else vo	u would li	ke to rai		
		•	J			se)	
Notes to d	scuss/question	_				se)	
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