E. Steven Lauer, P.A.
Estate Administration Questionnaire
Ancillary Administration in Connecticut

Please either print this form and bring the completed form to your appointment or download this form and email the electronically completed form to slauer@verolaw.org before your appointment.

1.   During which period or periods did decedent live in the State of Connecticut?

   _____

2.   Identify and generally describe each place of residence of the decedent within the last five years preceding death, indicating whether the decedent resided in a house which is rented or owned, apartment, hotel, nursing home or in a home of relatives or friends. _____

   _____

3.   Did the decedent live part of the time in Connecticut and part of the time outside of Connecticut? _____ If so, detail the facts, comparing the size and value of the local and foreign residences and the length of time spent in each state.

   _____

   _____

   _____

4.   Where and in what years did the decedent vote or register for voting during the five years preceding death?_____

   _____

   _____

5.   To which state or subdivision thereof and in what years did the decedent pay a tax on income or a tax on real or personal property during the last five years? If an income tax was paid, was it on a resident or nonresident basis? _____

   _____

   _____

6. Did the decedent file federal income tax returns? _____ If so, where and what was stated therein to be decedent's residence?_____

_____

7. Was decedent employed or engaged in a business or profession up to the time of death? _____

If so, state the location and nature of same. _____

_____

_____

8. Did the decedent ever execute a Will, Codicil, trust indenture, deed, mortgage, lease or any other document in which decedent was described as a resident of Connecticut?_____

If so, give dates and facts. _____

_____

_____

9. Was decedent a party to any legal proceedings in the State of Connecticut during the last five years? _____ If so, explain fully.

_____

_____

_____

10. Did decedent hold membership in any religious organizations or in clubs or societies in Connecticut? _____

Detail facts.

_____

_____

_____

11. If decedent died testate, submit a copy of last Will.

12.   Did the decedent maintain a safe deposit box in the State of Connecticut at any time during five years preceding death? _____ If so, where was such safe deposit box maintained?

_____

_____

_____

13.   Did the decedent hold a Connecticut driver's license at any time during the five years preceding death? _____ If so, give dates. _____

_____

_____

14.   Was an automobile registered in the decedent's name in Connecticut at any time within five years preceding death? _____ If so, give dates.

_____

_____

_____

15.   Was the decedent hospitalized in Connecticut at any time within five years preceding death? _____ If so, where and when? _____

_____

_____

16.   Did the decedent undergo medical treatment or examination in Connecticut at any time during five years preceding death? _____ If so, please furnish names and addresses. _____

_____

_____

17.   Give estimate of the gross value of the estate, everywhere situated.

_____

_____

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