

SAMPLE TEMPLATE — STATE VARIATION MAY APPLY

Last Will and Testament

Place: [CITY]

Date: [DD MONTH YYYY]

I, [TESTATOR FULL NAME], son/daughter of [PARENT NAME], aged [AGE] years, resident of [FULL ADDRESS], being of sound mind, memory and understanding, do hereby revoke all previous wills, codicils, testamentary dispositions and instruments made by me at any time prior to the date hereof, and do declare this to be my last Will and Testament.

1. Family

My wife / husband is [SPOUSE NAME]. My children are [LIST CHILDREN WITH AGE], and my surviving parents are [PARENT NAMES IF APPLICABLE].

2. Schedule of property

I am the absolute owner of the following property, which I am entitled to dispose of by Will:

(a) Immovable property: [DESCRIBE — flat / plot / agricultural land with full address, area, sale deed reference];

(b) Movable property: [bank accounts at [BANK / BRANCH], fixed deposits, shares in [COMPANY / DEMAT NO.], jewellery, vehicles with registration details];

(c) Insurance policies and PF: [INSURER, POLICY NUMBERS, EPF account].

3. Bequests

I bequeath my property as follows:

(a) The immovable property at [ADDRESS] to [BENEFICIARY 1 NAME], son/daughter of [NAME], absolutely;

(b) All my movable property and bank balances to be divided equally between [BENEFICIARY 2] and [BENEFICIARY 3], absolutely;

(c) [ANY OTHER SPECIFIC BEQUESTS — jewellery to [PERSON], a sum of Rs. [AMOUNT] to [CHARITABLE TRUST/PERSON], etc.]

4. Executor

I appoint [EXECUTOR FULL NAME], son/daughter of [PARENT], resident of [ADDRESS], to be the executor of this Will. The executor shall be entitled to [no remuneration / reasonable remuneration / a fixed sum of Rs. ____] for the work involved.

5. Residue

All the rest, residue and remainder of my estate, both real and personal, of every kind and description and wheresoever situated, shall pass to [RESIDUARY BENEFICIARY] absolutely.

6. Sound mind

I declare that I make this Will of my own free will, without any coercion, undue influence, fraud, or misrepresentation, being in good health and of sound disposing mind.

Signed by the testator:

[TESTATOR SIGNATURE]

[TESTATOR NAME]

WITNESSES

Signed, published and declared by the above-named [TESTATOR NAME] as his/her last Will and Testament in the presence of us both, present at the same time, who at his/her request and in his/her presence and in the presence of each other have hereunto subscribed our names as witnesses.

Witness 1

Signature: _____

Name: [NAME]

Address: [ADDRESS]

Date: [DATE]

Witness 2

Signature: _____

Name: [NAME]

Address: [ADDRESS]

Date: [DATE]

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