



# Personal inventory of assets and important documents

MAKING THINGS EASIER FOR YOUR LOVED  
ONES IN THE EVENT OF YOUR DEATH  
OR LOSS OF CAPACITY



**CAUTION**

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## Section 1

# Personal information

### Client

First and last names at birth: \_\_\_\_\_

Date of birth: YYYY / MM / DD Social insurance number: \_\_\_\_\_

Address: \_\_\_\_\_

Phone number: \_\_\_\_\_ Cell-phone number: \_\_\_\_\_

Email: \_\_\_\_\_

Marital status:  Single  Married  Civil union  Common-law  
 No longer living with partner  Legally separated  Divorced  Widowed

### Spouse

First and last names at birth: \_\_\_\_\_

Date of birth: YYYY / MM / DD Social insurance number: \_\_\_\_\_

Address (if different): \_\_\_\_\_

Phone number: \_\_\_\_\_ Cell-phone number: \_\_\_\_\_

Email: \_\_\_\_\_

### Children

Child's first and last names at birth	Date of birth

## Section 2

# Financial details

### Life insurance and critical illness insurance policies

#### Broker or representative

Name:	Phone number:
Address:	
Insurer:	Policy number:
Insurer:	Policy number:
Insurer:	Policy number:
Group insurance:	
Loan insurance:	
Location of life insurance policies:	
Accidental death:	
Life insurance coverage under the provisions of a credit card contract:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Issuer:	
Life insurance coverage as a club member (e.g., CAA):	<input type="checkbox"/> Yes <input type="checkbox"/> No
Issuer:	
Life insurance coverage as a member of another organization or association:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Issuer:	



Has your situation changed? Remember to let your financial security advisor know.

#### Accounts

Institution and contact information	Account number	Type of account	Debit card
		<input type="checkbox"/> Individual <input type="checkbox"/> Joint	<input type="checkbox"/> Yes <input type="checkbox"/> No
		<input type="checkbox"/> Individual <input type="checkbox"/> Joint	<input type="checkbox"/> Yes <input type="checkbox"/> No
		<input type="checkbox"/> Individual <input type="checkbox"/> Joint	<input type="checkbox"/> Yes <input type="checkbox"/> No

## Section 2

# Financial details (cont.)



Upon death, all your assets, including your investments, are deemed to be sold and any capital gains are subject to tax. Based on the value of your estate, your advisor and their team will be able to calculate the taxes owed upon death.

### Investments

#### Non-registered

Institution	Contact person and contact information	Account number	Amount	Type of investment	Investment held
					<input type="checkbox"/> Individually <input type="checkbox"/> Jointly
					<input type="checkbox"/> Individually <input type="checkbox"/> Jointly
					<input type="checkbox"/> Individually <input type="checkbox"/> Jointly

#### Tax-free savings account (TFSA)

Institution	Contact person and contact information	Account number	Amount	Type of investment

#### Registered (RRSP, RRIF, LIRA, etc.)

Institution	Contact person and contact information	Account number	Amount	Type of investment or account (RRSP, RRIF)



Any taxes payable upon death will be deferred if the registered plan is rolled over to a spouse.

#### Registered education savings plan (RESP)

Institution	Contact person and contact information	Account number	Amount	Type of investment or account	Beneficiaries



Do you deal with more than one institution?  
Combining all your investments in one place can help maximize your returns.

## Section 2

# Financial details (cont.)

### Credit cards

Issuer:	Number:
Issuer:	Number:
Issuer:	Number:

### Property and casualty insurance policies

#### Home

Insurer:	Phone number:
Address:	

#### Automobile

Insurer:	Phone number:
Address:	

#### Other

Insurer:	Phone number:
Address:	

### Income tax returns

#### Accountant

Name:	Phone number:
Address:	
Location of previous income tax returns:	

### Section 3

# Home and other real estate property

## Principal residence

Owner's name and contact information:

Date of purchase:

Price:

Mortgage amount:

Date of initial loan:

Lender(s):

Current property value:

Insurance:



**Do you have more than one home? Only capital gains realized on the disposition of your principal residence are tax exempt. Make sure you have a strategy in place.**

## Secondary residence

Owner's name and contact information:

Date of purchase:

Price:

Mortgage amount:

Date of initial loan:

Lender(s):

Current property value:

Insurance:



**Has your cottage gone up in value since you bought it? The taxes owed on your cottage after your death may force your estate liquidator to sell it. Speak to your advisor to learn more.**

## Income property

Owner's name and contact information:

Date of purchase:

Price:

Mortgage amount:

Date of initial loan:

Lender(s):

Current property value:

Insurance:

Annual income:



**Life insurance can be an excellent strategy for offsetting taxes payable upon death, especially in the case of income property owners.**



## Section 4

# Debtors, debts and financial obligations

### Debts and financial obligations

**Line of credit**  Yes  No

Financial institution: \_\_\_\_\_ Account number: \_\_\_\_\_

**Life insurance**  Yes  No

Location of contract: \_\_\_\_\_

**Personal loan 1 (e.g. student, renovations, other)**  Yes  No

Financial institution: \_\_\_\_\_ Account number: \_\_\_\_\_

**Life insurance**  Yes  No

Location of policy: \_\_\_\_\_

**Personal loan 2 (e.g. student, renovations, other)**  Yes  No

Financial institution: \_\_\_\_\_ Account number: \_\_\_\_\_

**Life insurance**  Yes  No

Location of policy: \_\_\_\_\_

**Personal debt**  Yes  No

Name of creditor: \_\_\_\_\_ Phone number: \_\_\_\_\_

Address: \_\_\_\_\_

Location of document: \_\_\_\_\_



## Section 5

# Professional advisors and location of documents

### Professional advisors

#### Notary

Name:	_____	Phone number:	_____
Address:	_____		

#### Lawyer

Name:	_____	Phone number:	_____
Address:	_____		

#### Accountant

Name:	_____	Phone number:	_____
Address:	_____		

#### Physician

Name:	_____	Phone number:	_____
Address:	_____		

#### Financial advisor

Name:	_____	Phone number:	_____
Address:	_____		



**Are your personal finances managed by multiple advisors?  
Dealing with a single advisor can make managing your finances much easier.**

### Location of documents

	You	Your spouse
Will		
Power of attorney		
Protection mandates		
Birth certificate		
Legal contracts		
Tax returns		
Safety deposit boxes		
Property titles		

## Section 6

# Legal documents



**Did you know that common-law spouses can't inherit if they're not named in the deceased spouse's will?**

### Will

Yes  No

Date of last will:    YYYY    /    MM    /    DD

Location of will (or copy):

Will notarized/drawn up by a legal advisor:  Yes  No

Name:

Phone number:

Address:



**Having a notarized will makes settling your estate easier.  
The Chambre des notaires du Québec can help. Go to [www.cnq.org/en](http://www.cnq.org/en).**

### Liquidators

Name:

Phone number:

Address:

Name:

Phone number:

Address:

Name:

Phone number:

Address:

### Alternate liquidator

Name:

Phone number:

Address:

### Protection mandate

Yes  No

Date of last will:    YYYY    /    MM    /    DD

Location of protection mandate (or copy):

Name of mandatary:

Protection mandate drawn up by a legal advisor:  Yes  No

Name:

Phone number:

Address:

## Section 6 Legal documents (cont.)

### Trust(s)

Type	Value	Beneficiaries	Trustees

### Strategies (bequests, planned giving, etc.):

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Did you know that you can entrust the liquidation of your estate to the trust services team at Desjardins Private Wealth Management? It's a great way to make life easier for your heirs.

### Funeral arrangements

Instructions for the funeral:  Yes  No

Next-of-kin will handle funeral arrangements:  Yes  No

Remains to be prepared for:  Open-casket viewing  Burial  Cremation

Other details:

Instructions are detailed:  in the will  in another document located:

Pre-arranged funeral services contract:  Yes  No

### Funeral home

Name: \_\_\_\_\_ Phone number: \_\_\_\_\_

Address: \_\_\_\_\_

Location of documents: \_\_\_\_\_

## Section 6

# Legal documents (cont.)

### Marriage/civil union/common-law relationship contract

Marital status:  Married  Civil union  Common-law

Date of marriage, civil union or start of common-law relationship: YYYY / MM / DD

Location of contract:

Matrimonial regime:  Partnership of acquests  Separation as to property  Community of property

Contract drawn up by a legal advisor:  Yes  No

Name:

Phone number:

Address:

### Decree of judicial separation or divorce

No longer living with partner  Legally separated  Divorced

Date of separation or decree: YYYY / MM / DD

Location of decree:

### You are a widow(er)

Date of spouse's death: YYYY / MM / DD

Death certificate on hand:  Yes  No

Location of spouse's death certificate:

### Birth certificate

Location of birth certificate:

Location of child's/children's birth certificate(s):

Location of the adoption order for:

### You were not born in Canada

Location of citizenship certificate:

Other information:

Section 7

# Other personal effects

Item (car, jewellery, art, etc.)	Location

<b>Important documents</b> (credit cards, passport, health insurance card, etc.)	Location

# Notes



## When you choose Desjardins...

you're choosing Desjardins Group, the leading cooperative financial group in Canada, whose financial stability is recognized by the following credit ratings which are comparable, if not superior, to those of the five largest Canadian banks and insurance companies:

- Standard and Poor's A+
- Moody's Aa2
- Dominion Bond Rating Service AA
- Fitch AA-

As at March 23, 2018

[desjardins.com/estate](https://desjardins.com/estate)

