**Personal Affairs Checklist**

This is a confidential document. Keep it in a safe place at all times.



**Contents**

[PART 1 1](#_Toc358213038)

[**Glossary of Terms 1**](#_Toc358213039)

[**Introduction 2**](#_Toc358213040)

[**Purpose of this booklet 2**](#_Toc358213041)

[**Civil Service Employee Assistance Service (CSEAS) 2**](#_Toc358213042)

[**Other sources of information and advice 2**](#_Toc358213043)

[**Making a Will 3**](#_Toc358213044)

[PART 2 4](#_Toc358213045)

**My** [**Personal Details 4**](#_Toc358213046)

[**Social Welfare details 4**](#_Toc358213047)

[**Contact Details of my Legal Personal Representative(s) 5**](#_Toc358213048)

[**Details of my Will 5**](#_Toc358213049)

**My** [**Employment Details 6**](#_Toc358213050)

[**Group and Scheme Memberships 7**](#_Toc358213051)

[**My Personal Documents 8**](#_Toc358213052)

[**Bank /Building Society/ Post Office Account(s) details 9**](#_Toc358213053)

[**Credit Union Account details 10**](#_Toc358213054)

[**Stocks / Shares/ Investment details 10**](#_Toc358213055)

[**Credit Cards 11**](#_Toc358213056)

[**Car Details 11**](#_Toc358213057)

[**Other Assets 11**](#_Toc358213058)

[**Home Utilities 12**](#_Toc358213059)

[**Miscellaneous additional information 12**](#_Toc358213060)

# PART 1 Glossary of Terms

**Civil Status**

**This means being single, married, separated, divorced, widowed, in a civil partnership within the meaning of the *Civil Partnership and Certain Rights and Obligations of Cohabitants Act 2010* or being a former civil partner in a civil partnership that has ended by death or been dissolved.**

**Estate**

**The term used to describe all the deceased person’s belongings. This includes property, money and personal belongings; in fact everything that has to be distributed after death.**

**Legal Personal Representative**

**Person who deals with the administration of the estate of a deceased person**

**i.e. generic term for both executors and administrators.**

**Testator**

**This means a person who makes a Will.**

**Executor**

**Person named by testator to prove his/her Will and administer his/her estate.**

**Administrator**

**Person appointed to administer an estate where the deceased did not leave a Will.**

**Codicil**

**This is a document for adding to, altering, or confirming a Will previously made by the testator.**

**Grant of Probate**

**Legal document obtained from the Probate Office proving the Will and entitling the executor to administer the estate.**

**Grant of Administration**

**Legal document obtained from the Probate Office proving entitlement of the next-of-kin to administer the estate where the person died without making a Will.**

**Inheritance - Refers to a transfer of an asset by a person on death under Capital Acquisition Tax law.**

**Disclaimer: *The contents of this booklet are informative only and are not intended to be legally binding or to convey legal advice. Neither the Department of Public Expenditure & Reform, nor its agents accept any liability in relation to the operation of these matters. The Department of Public Expenditure & Reform is not responsible for any consequences that may be caused directly or indirectly by the content within this booklet or from external websites mentioned herein. The contents have been compiled on the basis of information available as at October 2013.***

**Introduction**

## Purpose of this booklet:

**This booklet has been produced by the Civil Service Employee Assistance Service (CSEAS) for civil servants. It provides a means of recording concise details of your personal affairs and papers. The information contained therein may be useful to family/next-of-kin in the event of your death.**

**PART 2 of this booklet can be completed by you as a detailed record of your personal affairs and papers.**

**It is advisable to keep your completed document in a safe and secure place. If you choose to save this booklet electronically (when completed) please ensure it is saved to a secure area on your computer where it can be easily accessed by family/next-of-kin in the event of your death.**

## Civil Service Employee Assistance Service (CSEAS)

**The CSEAS is a centralised service within the Department of Public Expenditure and Reform (DPER). Services and support are provided on a regional basis to civil servants which aim to positively enhance their wellbeing. This Service is an important component of an ethos of promoting employee wellness, resilience and organisational effectiveness.**

**Upon the death of a serving civil servant the Civil Service Employee Assistance Service is available to provide practical information, advice and support to the family of the deceased civil servant.**

**Telephone: 0761 000 030**

**Email:** [**cseas@per.gov.ie**](mailto:cseas@per.gov.ie)

**Website:** [**www.cseas.per.gov.ie**](http://www.cseas.per.gov.ie)

## Other sources of information and advice:

## Citizens Information [www.citizensinformation.ie](http://www.citizensinformation.ie)

* **Civil Service Pensions Information Centre** [**www.cspensions.gov.ie**](http://www.cspensions.gov.ie)
* **Dept. of Employment Affairs & Social Protection** [**www.welfare.ie**](http://www.welfare.ie)
* **Health Service Executive** [**www.hse.ie**](http://www.hse.ie)
* **Pensions Ombudsman** [**www.pensionsombudsman.ie**](http://www.pensionsombudsman.ie)
* **Probate information** [**www.courts.ie**](http://www.courts.ie)
* **Revenue** [**www.revenue.ie**](http://www.revenue.ie)
* **Office of the Registrar General** [**www.welfare.ie**](http://www.welfare.ie)
* **Think ahead** [**www.thinkahead.ie**](http://www.thinkahead.ie)

## The following links can only be accessed through civil service work-place computers. The relevant contact phone numbers are included:

* **Peoplepoint** [**www.peoplepoint.gov.ie**](http://www.peoplepoint.gov.ie) **Phone: 0761 071 000**
* **Payroll Shared Service** [**www.pssc.gov.ie**](http://www.pssc.gov.ie) **Phone: 0761 002 702**

## Making a Will:

**It is prudent that you engage a qualified solicitor to assist you in drawing up and supervising the execution of your Will.**

**The main reasons for making a Will are:**

1. **You choose who may act as your Executor to administer your assets after your death. It is prudent that you appoint at least two executors, both of whom should be competent in their roles, younger than you and respected in your family to ensure your estate is administered properly and without dispute as soon as possible after your death.**
2. **You decide who will inherit your estate.**

**Making a Will allows you decide how your assets with be administered. It allows you distribute your assets in the most tax efficient manner possible, having regard to the relevant tax thresholds and reliefs of the various beneficiaries in your estate.**

**Check** [**www.revenue.ie**](http://www.revenue.ie) **for further information on Capital Acquisitions Tax thresholds applicable to inheritances.**

**Information on probate is available at** [**www.courts.ie**](http://www.courts.ie)

**PART 2**

## My Personal Details

|  |  |
| --- | --- |
| **Name** | **Date of Birth** |

|  |
| --- |
| **Home Address** |
| **Civil Status\*** see page 1– Glossary of Terms |
| **Spouse’s/Civil Partner’s/Partner’s Name** |

|  |  |
| --- | --- |
| **Children’s Names** | **Date of Birth:** |
|  |  |
|  |  |
|  |  |
|  |  |

|  |  |
| --- | --- |
| **Do you have an adult child with special needs?**  **If Yes, please provide details under Children (above)** | **Yes No** |

## Social Welfare details

|  |  |
| --- | --- |
| **PPSN** |  |
| **Social Welfare payment or pension (if applicable)** |  |
| **Social Welfare Claim No.**  **(if applicable)** |  |

## Contact Details of my Legal Personal Representative(s)

|  |  |
| --- | --- |
| **Name and Address of my Legal Personal Representative (No.1)** | **Contact ph. no./email address** |
| **Name and Address of my Legal Personal Representative (No.2)** | **Contact ph. no./email address** |

## Details of my Will

|  |  |
| --- | --- |
| **I have made a Will – please tick** | **Yes No** |
| **My Will is placed with/at** |  |
| **Date of my Last Will & Testament** |  |
| **Codicil to my Will & date (if any)** |  |
| **Contact details of my Solicitor:**  **Name & Address**  **Contact number/email address** |  |

## My Employment Details

|  |  |
| --- | --- |
| **Employer**  **(former employer, if retired)** |  |
| **Employer’s Address** |  |
| **Employer’s Registered Number** |  |
| **Employer’s Ph. no.** |  |
| **Personnel/Payroll No.** |  |
| **PSSC Pension No.**  **(if retired)** |  |
| **PPSN**  **(see P.60/Tax Certificate)** |  |
| **Social Insurance Class**  **(see Note below)** |  |

|  |  |
| --- | --- |
| **Directorship(s) held - please tick**  **Name & Address of company**  **Tax Ref. No.** | **Yes No** |

N**ote:**

* **Most established civil servants recruited prior to 6th April 1995 pay social insurance at Class B rate.**
* **Most civil servants recruited to established posts on or after 6th April 1995 pay social insurance at Class A rate.**
* **All non-established civil servants pay Class A rate.**
* **Most un-established civil servants pay social insurance at Class A rate.**
* **Social insurance Class D rate applies to permanent and pensionable employees in the public service other than those paying Class B and Class C (Army) recruited prior to 6th April 1995.**
* **Check** [**www.welfare.ie**](http://www.welfare.ie) **for Social Welfare benefits under the various social insurance classes.**

## Group and Scheme Memberships

**Membership - please tick**

|  |  |  |
| --- | --- | --- |
| **Civil Service Spouse’s & Children’s Pension Scheme** | **YES** | **NO** |
| **Civil Service Credit Union** | **YES** | **NO** |
| **Cana Credit Union (Revenue staff only)** | **YES** | **NO** |
| **Hospital Saturday Fund** | **YES** | **NO** |
| **Public Service Friendly Society** | **YES** | **NO** |
| **An Post National Instalment Savings Scheme** | **YES** | **NO** |
| **An Post Savings Account** | **YES** | **NO** |
| **Private Health Insurance**  **Company Name:** | **YES** | **NO** |
| **Income Continuance Plan**  **Company Name:** | **YES** | **NO** |
| **Life Assurance Policy**  **Company Name:** | **YES** | **NO** |
| **Additional Voluntary Contribution Scheme**  **Company Name:** | **YES** | **NO** |
| **Trade Union**  **Please specify :** | **YES** | **NO** |
| **Prize Bonds (list the numbers below)** | **YES** | **NO** |
| **Other group scheme**  **Please specify:** | **YES** | **NO** |

**My Personal Documents**

|  |  |  |
| --- | --- | --- |
| **Document held** | **Tick here** |  |
| **Birth Certificate** |  |  |
| **Marriage Certificate**  **Civil Partnership Certificate** |  |  |
| **Divorce/Separation/Civil Partnership Dissolution docs.** |  |  |
| **Passport** |  |  |
| **Life Assurance policies** |  |  |
| **Insurance policies as follows -**  **House insurance**  **Car insurance**  **Mortgage Protection**  **Others** |  |  |
| **Property Deed(s) as follows -**  **Family home**  **Other properties & addresses**  **(e.g. farmland)** |  |  |
| **Mortgage paper(s)** |  |  |
| **Grave plot papers** |  |  |
| **Medical Card**  **(if held)** |  |  |

**Bank /Building Society Account(s) Details**

|  |  |
| --- | --- |
| **Bank/Building Society**  **(if joint account state other account holder’s name)** |  |
| **Address** |  |
| **Account(s) details** |  |
| * **IBAN** |  |
| * **BIC** |  |
| **Account(s) details** |  |
| * **IBAN** |  |
| * **BIC** |  |
| **Account(s) details** |  |
| * **IBAN** |  |
| * **BIC** |  |

|  |  |
| --- | --- |
| **Bank/Building Society**  **(if joint account, state other account holder’s name)** |  |
| **Address** |  |
| **Account(s) details** |  |
| * **IBAN** |  |
| * **BIC** |  |
| **Account(s) details** |  |
| * **IBAN** |  |
| * **BIC** |  |
| **Account(s) details** |  |
| * **IBAN** |  |
| * **BIC** |  |

## 

## Post Office Account details

|  |  |
| --- | --- |
| **Post Office Name & Address** |  |
| **Account(s) details** |  |

## Credit Union Account details

|  |  |
| --- | --- |
| **Credit Union Name & Address** |  |
| **Account(s) details** |  |

## Credit Cards

|  |  |
| --- | --- |
| **Credit Card Company & Address** |  |
| **Credit Card Account(s) details** |  |

## 

## Stocks/Shares/Investment Details

|  |  |
| --- | --- |
| **Company Name(s) & Address(es)** |  |
| **Stocks/ shares/Investment details** |  |

## Car Details

|  |  |
| --- | --- |
| **Car Make, Model & Reg. No.** |  |
| **Motor Insurance Co. & Address** |  |
| **Motor Insurance Policy No.** |  |

## 

## Other Assets

**(e.g. Jewellery, Artwork, Collectibles, Boat)**

|  |
| --- |
|  |

**Home Utilities**

|  |  |  |
| --- | --- | --- |
| **Utility Item** | **Supplier** | **Account No.** |
| * **Electricity** * **Gas** * **Telephone (mobile)** * **Telephone (landline)** * **TV network provider** * **WiFi/Broadband** * **TV Licence** * **Refuse Collection** * **Dog Licence** |  |  |

## 

## **Miscellaneous additional informatio**n

|  |
| --- |
|  |

**Date of completion of this document: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**