



## CLIENT QUESTIONNAIRE FOR CONSERVATORSHIP [Strictly Confidential]

### Part 1: Information for Preparing Petition

1. Petitioner's personal and family data

Name: \_\_\_\_\_

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

Telephone: \_\_\_\_\_

Social Security Number: \_\_\_\_\_

Drivers License Number and State: \_\_\_\_\_

Relationship to proposed conservatee: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

If petitioner is the proposed conservatee's spouse, is petitioner a party to legal separation, dissolution, or annulment, or adjudication of nullity of marriage proceeding? \_\_\_\_\_

If petitioner is the proposed conservatee's domestic partner, has petitioner terminated the domestic partnership or does petitioner intend to do so?  
\_\_\_\_\_

Is petitioner a creditor? Or does the proposed conservatee owe petitioner money?  
\_\_\_\_\_

2. Proposed conservatee's personal and family data

Name (and all variations used): \_\_\_\_\_

Date of birth: \_\_\_\_\_

Social Security Number: \_\_\_\_\_

Employer: \_\_\_\_\_

Address during the past 5 years: \_\_\_\_\_

Permanent address and telephone number, if different from that given above:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Will proposed conservatee continue to live there; if not, reason change is proposed:

\_\_\_\_\_  
\_\_\_\_\_

Physicians' names, addresses, and telephone numbers: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Is proposed conservatee a patient in or on leave of absence from a California state institution? If so, give name and address of facility: \_\_\_\_\_

\_\_\_\_\_

Is proposed conservatee receiving benefits from the Veterans Administration? If so, give address of office handling claim and claim number:

\_\_\_\_\_

Is proposed conservatee developmentally disabled? If so, give address of local regional center working with the proposed conservatee (on limited conservatorships): \_\_\_\_\_

3. Information required to identify persons entitled to notice and to give notice of hearing

Name and address of proposed conservatee's spouse or domestic partner:

\_\_\_\_\_

Names, addresses, telephone numbers and relationships of relatives within second degree (children, parents, grandchildren, grandparents, brothers, sisters):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

If no spouse, domestic partner, or second-degree relatives, names, addresses, telephone numbers and relationships of the following:

Spouse or domestic partner of predeceased parent of proposed conservatee:

\_\_\_\_\_

Children of predeceased spouse of proposed conservatee:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Siblings of proposed conservatee's parents, and if none, children of proposed conservatee's parents' siblings:

\_\_\_\_\_  
\_\_\_\_\_

Children of proposed conservatee's siblings: \_\_\_\_\_

\_\_\_\_\_

**Part 2: Information for Administering Conservatorship**

4. Documents and other information

Bank and savings and loan association accounts, name and address of institution or branch: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Real property (bring deeds if available, otherwise addresses): \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Securities (a copy of a statement from each brokerage account): \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Pension and retirement plans: \_\_\_\_\_

\_\_\_\_\_

Tangible personal property, *e.g.*, jewelry, paintings, cars, household furniture:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Insurance policies, *e.g.*, life, health, disability, auto:

\_\_\_\_\_  
\_\_\_\_\_

Business interests (partnership agreements, shareholder agreements, bylaws, etc.):

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Property located outside California (deeds if available, otherwise addresses):

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Other property, *e.g.*, royalties, mineral interests, accounts or notes receivable:

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Jointly held property and Totten trusts. Give special attention to how it will be managed and whether it should be used first or last in supporting the conservatee:

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Trusts of which proposed conservatee is beneficiary: \_\_\_\_\_

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Additional assets: \_\_\_\_\_

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Safe-deposit boxes. Give name and address of institution and box number; also, location of safe-deposit keys and name and address of any other person having access; describe contents: \_\_\_\_\_

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Name, address, and description of claim by others to property held by proposed conservatee. Is claim admitted?

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Description of claim by proposed conservatee to property held by another, including name and address of third party, description of property, and nature of claim: \_\_\_\_\_

Is proposed conservatee a party to any contracts? Name and address of other parties to contract, nature of contract, and copy, if available: \_\_\_\_\_

Debts. Names and addresses of creditors, amount of indebtedness, nature of debts, and whether liability is admitted or disputed: \_\_\_\_\_

What are proposed conservatee's testamentary plans? Names and addresses of persons who assisted in planning: \_\_\_\_\_

Has proposed conservatee made a will? Is a copy available? If so, from whom?

Who are the beneficiaries? \_\_\_\_\_

Is proposed conservatee the settlor or trustee of any trust? \_\_\_\_\_

Does proposed conservatee have an attorney? If yes, name, address, and telephone number of attorney: \_\_\_\_\_