



THE PUBLIC TRUSTEE
DEPOSITION OF INFORMATION ON WILLS AT
THE WILLS REGISTRY

The URA Centre
 East Wing
 45 Maxwell Road
 #06-11
 Singapore 069118
 Tel : 63251493
 Fax : 62242858

CONFIDENTIAL

A. PARTICULARS OF TESTATOR (Please attach a copy of Identity Card)	
Name:	Identity Card No:
Address:	
B. PARTICULARS OF WILL (Please DO NOT attach the Will or a copy of it)	
Date Will Was Drawn:	Was there a Previous Will: <input type="checkbox"/> Yes <input type="checkbox"/> No
Date Codicil Was Drawn (if any): NA	If Yes, does the Will Revoke Previous Will: <input type="checkbox"/> Yes <input type="checkbox"/> No
C. PARTICULARS OF SOLICITOR DRAWING UP WILL	
Name of Solicitor:	Name of Law Firm:
Address of Law Firm:	File Reference No:
D. CUSTODIAN OF THE WILL	
Name of Person Holding Will:	Address:
E. PARTICULARS OF INFORMANT	
Name of Person / Law Firm Depositing Information with the Public Trustee :	Date Information was Deposited with the Public Trustee :
F. CONSENT TO PUBLIC TRUSTEE (To be Completed if Informant is Not the Solicitor)	
Do you want the Public Trustee to inform your solicitors as stated above that you have deposited the information of your Will? <input type="checkbox"/> Yes <input type="checkbox"/> No	

Note: If the Will is not drafted by a solicitor, please indicate NA under Particulars of Solicitor Drawing Up Will.
 If Form is submitted by a solicitor, there is no need to attach a copy of the Testator's Identity Card.