



## **CONFIDENTIAL FAMILY QUESTIONNAIRE**

### **Welcome to Glazer Delmar**

We are pleased to confirm your appointment to see

on

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and look forward to seeing you then.

At Glazer Delmar we always aim to provide a bespoke, confidential, impartial and professional service that is friendly, cost effective and has the added value of the considerable experience of our solicitors in family law and family matters. Additionally, our family law specialist solicitors have experience in working closely with mediators.

In order to help progress your case, and to keep your costs to a minimum we would ask you to fill in this questionnaire, and send it back to us a day or so before your appointment. That way we can start to deal with your case at once and don't have to waste time filling in the background.

Tell us if you would like help completing this form.

We will ensure that all matters you bring to us are considered carefully and confidentially – whether they concern the future of your children, your financial or business interests or the continued well-being of your family.

In order to assist us, and to comply with Money Laundering regulations we must now request that you bring along with you the following documents when attending you appointment:

1. Photo Identify (Passport /Driving Licence)
2. Copy of Utility Bill
3. Proof of Income (Pay slips your last four weeks' payslips, your last bank statement and documentary proof of your savings in the form of statements of account, updated Income support letter (no more than one month old) or Job seekers Allowance letter)

We know it can seem quite daunting, but all of it is useful information and partially completed forms will delay the progression of your case.

## PERSONAL DETAILS

Your FULL name	
Your address	
Postal Code	
Contact Details	Home Telephone _____ Work Telephone _____ Mobile _____ E mail _____
Date of Birth	
Your Occupation	
Surname at birth	
Town of birth	
National Insurance No.	
Income details	£ _____ per week/month/year
Any other income?	£ _____
Do you receive benefits?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, what benefits do you receive (please tick all that apply)	<input type="checkbox"/> Income Support <input type="checkbox"/> Disability Living Allowance <input type="checkbox"/> Job Seekers Allowance <input type="checkbox"/> Working Families Tax Credit <input type="checkbox"/> Disabled Person's Tax Credit <input type="checkbox"/> Housing Benefit <input type="checkbox"/> Any other benefit? (please give details)

<p>How did you find out about Glazer Delmar?</p>	<p><input type="checkbox"/> Previous client      <input type="checkbox"/> Word of mouth  <input type="checkbox"/> Publicity              <input type="checkbox"/> Website</p> <p>Other, please specify _____</p>
<p>Have you or your partner previously consulted Glazer Delmar?</p>	<p><input type="checkbox"/> Yes      <input type="checkbox"/> No</p> <p>Please note, if we have previously acted for you both in a conveyancing transaction we may not be able to act for you. If you have any concerns please telephone the office prior to attending your appointment and continuing to complete this form.</p>
<p>Have you consulted other solicitors about this matter?</p>	<p><input type="checkbox"/> Yes      <input type="checkbox"/> No</p> <p>If so, please provide details of which firm and the approximate date you saw them</p> <p>_____</p> <p>_____</p>

Please confirm the advice you require from Glazer Delmar:- (you can tick more than one box that applies)

- |  |  |
|--|--|
| <input type="checkbox"/> Divorce/dissolution                 | <input type="checkbox"/> Occupation of the family home |
| <input type="checkbox"/> Civil Partnership dissolution       | <input type="checkbox"/> Ownership of the family home  |
| <input type="checkbox"/> Residence of children               | <input type="checkbox"/> Care proceedings              |
| <input type="checkbox"/> Contact with children               | <input type="checkbox"/> Making a Will                 |
| <input type="checkbox"/> Maintenance for yourself            | <input type="checkbox"/> Transfer of equity            |
| <input type="checkbox"/> Injunction                          | <input type="checkbox"/> Property sale/purchase        |
| <input type="checkbox"/> Maintenance to or from your partner | <input type="checkbox"/> Power of Attorney             |
| <input type="checkbox"/> Maintenance for your children       | <input type="checkbox"/> Other, please specify         |
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## THE OTHER PARTY

FULL name	
Date of birth	Age
Their address	_____ _____ _____
Their occupation	
Approx Income £	
Their relationship to you	

Do you habitually reside in the UK?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Does your partner habitually reside in the UK?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Are you still living with your partner?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If not, when did you separate?		
Address at which you last lived together?	_____ _____ _____	
Date of Marriage		
Place of Marriage		
Please provide full details		

**CHILDREN**

Please give the names of your children and any other children whom you regard as part of your family, with dates of birth. If they are at school or in further education, please state where. Please indicate if you think any child has any special needs

	Child 1	Child 2	Child 3
Child's FULL name			
Date of Birth			
Place of Education			
Place of Education address	_____ _____ _____	_____ _____ _____	_____ _____ _____
Please state any special needs you feel the child may have			

	Child 4	Child 5	Child 6
Child's FULL name			
Date of Birth			
Place of Education			
Place of Education address	_____ _____ _____	_____ _____ _____	_____ _____ _____
Please state any special needs you feel the child may have			

Who do the Children live with?	
If there are issues in dispute with regard to the Children, please provide:	<p>Other parents address</p> <p>_____</p> <p>_____</p> <p>Occupation</p>
Is the father named on the birth certificate?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Is there a dispute over who is the father?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you or your partner have other children?	<input type="checkbox"/> Yes <input type="checkbox"/> No if so please give details _____ _____
If you intend to separate, has it been agreed where the children will live?	<input type="checkbox"/> Yes <input type="checkbox"/> No If so please give details _____ _____

## LEGAL PROCEEDINGS

Have any court proceedings started? If so, what proceedings, in what court, and what stage has been reached?	
Has an order been made, sought or threatened to protect any member of the family or their property? If so, give details	

**FINANCIAL**

<p>Is the family home owned?</p>	<p><input type="checkbox"/> Yes      <input type="checkbox"/> No</p> <p>If yes, please provide details as to who owns the property, whether it is owned jointly, its approximate value, amount of mortgage outstanding, when the property was purchased and whether there is an endowment policy linked to the mortgage</p> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/>
<p>Do you and your partner have any joint bank or building society accounts?</p>	<p><input type="checkbox"/> Yes      <input type="checkbox"/> No</p> <p>If so, please give details</p> <hr/> <hr/>
<p>Do you have any joint debts?</p>	<p><input type="checkbox"/> Yes      <input type="checkbox"/> No</p> <p>If so, please give details</p> <hr/> <hr/>
<p>Do you or your partner have any assets?</p>	<p><input type="checkbox"/> Yes      <input type="checkbox"/> No</p> <p>If so, please give details</p> <hr/> <hr/>
<p>Do you or your partner have any pension rights?</p>	<p><input type="checkbox"/> Yes      <input type="checkbox"/> No</p> <p>If so, please give details</p> <hr/> <hr/>

