

Registers of Wills and Mandates of the Barreau du Québec

Maison du Barreau 445, Saint-Laurent Blvd, Montréal (QC) H2Y 3T8 514 954-3411 / 1 844 954-3411

THIS SEARCH REQUEST IS TO BE USED BY THE PUBLIC

- Will search
- □ Search for mandate given in anticipation of incapacity

INFORMATION ABOUT THE DECEASED OR MANDATOR											
Last name at birth:	t birth: First name:										
Did the deceased or does the mandator have a social insurance number?											
☐ Yes	Number:										
□ No Justify :											
Date of birth Day/Month/Year Day/Month/Year Day/Month/Year											
Occupations (before retirement, if applicable):											
☐ No occupation								(?)			
Last home address:											
Street number and name	Apt.	City	Province/State				Years				
Previous addresses (Since 1979 fo	r will searches and	d since 1991 for manda	te searches. If necessary, use a	n additiona	ıl sheet	of paper.):	1				
Street number and name	Apt.	City	? ovince/State	Postal c	ode	Country	Years				
		, 	,	Ι.	1	,	1				
Street number and name	Apt.	City	Province/State	Postal c	ode	Country	Years				
				1 1							
Street number and name	Apt.	City	Province/State	Postal c	ode	Country	Years				
Marital status at time of death or incapacity (Place an X in only one box.):											
Single	5		ı								
☐ Married Date of union: ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐											
☐ Common-law spouse		,, ,									
☐ Divorced	Spouse's fi	rst and last nar	ne at birth:								
☐ Separated											
■ Widowed	Last name			First ı	name						

	INFORMATION ABOUT	THE DECE	EASED OR MAN	IDATOR (CO	NT'D)					
Aside from the spouse at time of death or incapacity, was the person previously married to any other person(s)?										
☐ Yes ? ? No I don't know	Date of union: Day/Month/Year	Last and fi	nd first name of spouse at birth:							
	Day/Month/Year	Last name Last and first name of spouse at birth: First name First name								
REQ	UEST FOR WILL SEARCH		REQU	JEST FOR M	ANDATE SEARCH					
Has the person previously made a will? Yes Lawyer's name: No Date of will: Day/Month/Year			Has the person previously made a mandate? Yes Lawyer's name: No Date of mandate: Day/Month/Year							
Additional inform	ation: INFORMATION ABOUT	THE PER	Additional infor		EARCH					
Last name:				me:	8					
Address:	zation (if applicable):									
Street number	Street name	ĺ		. 1	Apt.					
City		Prov	ince/State Post	tal code Cour	ntry					
Telephone no. (home): Telephone no. (work or cellphone):										
Email:										
Cost of the search	ı : \$23 (tax included)									
Method of payme	nt: Money order* Certif *Payable to the order of Barreau	fied cheque du Québec	Credit can Credit card no Expiry date:		-Card)					
WITH MY SIGNA	ATURE, I HEREBY CONFIRM TH	IAT THE A	BOVE INFORMA	ATION IS AC	CURATE AND TRUE.					
Signature					Date					

Have you completed, printed and signed the form?

Please mail it to the address marked at the top of the form, along with your payment and the documents requested:

□ Will search: Include the original of the document entitled "Copy of an Act of Death" or "Certificate of Death", issued by the Directeur de l'État civil.

If you want us to return the original copy, you must enclose a photocopy in addition to the original.

[☐] Mandate search: Include the original copies of a recent medical and psychosocial assessment certifying the mandator's incapacity or a recent report from the general manager of a health care or social services institution, along with an affidavit of your interest in the mandator. If you want us to return the original copies, you must enclose a photocopy, in addition to the originals.

SECTION ON "INFORMATION ABOUT THE DECEASED OR MANDATOR"

In order for us to carry out the search you have requested, please read and follow the instructions below to correctly fill out the form. If the required information is not entered, we will not be able to conduct the search and we will have to return your request form to you. We need complete, accurate information to identify the last testamentary instrument of the deceased or the last mandate of the incapable person. We thank you in advance for your cooperation.

SECTION ON "INFORMATION ABOUT THE DECEASED OR MANDATOR"

- · Last name (REQUIRED): Enter the family name at birth. Don't enter the spouse's name.
- First name (REQUIRED): Enter the person's first name; any other first names on the birth certificate are not necessary.
- Social insurance number (REQUIRED): If the deceased or incapable person has one, you must enter it. If the person doesn't have one, you must justify why.
- Date of birth (REQUIRED): Enter at least the year of birth.
- Date of death for a will search or date of incapacity for a mandate search (REQUIRED): Enter the date of death mentioned on the document entitled "Copy of an Act of Death" or "Certificate of Death", issued by the Directeur de l'État civil. For a mandate search, enter the presumed date of incapacity. This date has no legal value, but is necessary for search handling purposes.
- Occupations: Enter the occupations before retirement. Please be as precise as possible, for example: construction labourer, plant attendant, nurse's aide. If the deceased has never been employed, enter "none".
- Last home address (REQUIRED): Enter the street name and number, city, province or state, postal code and country. If the deceased or incapable person was hospitalized at time of death, enter that person's address prior to hospitalization.
- Previous addresses since 1979 for wills. This information is very important. If there is no known will, enter all addresses since 1979, specifying the years of residence at each address, for example: Montréal, 1979-1988. In case of a known will, enter all addresses after the date of the known will.
- Previous addresses since 1991 for mandates. This information is very important. If there is no known mandate, enter all the addresses since 1991, specifying the years of residence at each address, for example: Montréal, 1991-2000. If there is a known mandate, enter all the addresses after the date of the known mandate.
- Marital status (REQUIRED): Place an X in the box corresponding to the marital status at time of death or incapacity and don't place an X in more than one box.
- Spouse's last and first name (REQUIRED): Enter the last and first name of the present spouse, if applicable, whether by marriage, common-law or civil union.
- Previous spouses: If applicable, enter the last and first names of all previous spouses, whether by marriage, common law or civil union as well as the date of marriage, even if they are now deceased.
- Last known will or mandate: Enter the name of the lawyer and the date that this document was signed. If you don't know the exact date, just enter the year. If the last known will or mandate was drawn up by a notary, you must also have a search conducted by the Chambre des notaires du Québec.

SECTION ON "INFORMATION ABOUT THE PERSON REQUESTING THE SEARCH"

All information requested in this section must be filled in. All fields must be completed.

IMPORTANT NOTE:

The Barreau du Québec cannot be held responsible for any errors made on a certificate when that error is due to missing or incorrect information on the search request; therefore, please make sure that all information entered on your request form is correct. Don't forget to print and sign your request form and to mail it to the address marked at the top of the form and also, to enclose the required documents and your payment.

PAYMENT METHODS AND WAITING PERIOD

Your will or mandate search request form will be handled once your payment is made and the following required documents have been received:

- For a will search: the original copy of the document entitled "Copy of an Act of Death" or "Certificate of Death", issued by the Directeur de l'État civil. If you want us to return the original copy to you, you must enclose a photocopy (in addition to the original). No photocopies—not even certified ones—will be accepted as proof of death.
- For a mandate search: original copies of a recent medical and psychosocial assessment certifying the mandator's incapacity **or** a recent report from the general manager of a health care or social services institution, **along with** an affidavit of your interest in the mandator. (If you want us to return the original copies to you, you must enclose a photocopy (in addition to the originals). **No photocopies—not even certified ones—will be accepted as proof of incapacity.**

Enclose your payment (money order or certified cheque made payable to the Barreau du Québec or your credit card number). If you come to our offices, you will also have the option of paying cash. Or you may fill out a request form and pay online by clicking on this link: www.barreau.qc.ca/en/public/testament-mandat

Please note that personal cheques are not accepted.

The waiting period to receive your certificate varies depending on the date of the death:

- If the death or incapacity occured less than 2 weeks prior to your search request, your search certificate will be mailed within 3 weeks of the reception of your search request.
- If the death or incapacity occured more than 2 weeks prior to your search request, your search certificate will be mailed within 2 weeks of the reception of your search request.

Once you receive your certificate, if the result is positive, you will have to contact the lawyer to obtain the will or the mandate.

Please note: To respect the confidentiality of your request form, we will provide information on that form only to the person who has submitted a search request.

The Barreau du Québec's Register of Wills was created on December 1, 1979 and its Register of Mandates on August 29, 1991; consequently, we are therefore unable to trace any wills or mandates made before these dates.