

# SCHANKER AND HOCHBERG, P.C.

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## CRITICAL INFORMATION WORKSHEET

*LAST UPDATED ON:* \_\_\_\_\_

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

### I. ASSETS

#### a. Real Estate

- Location \_\_\_\_\_
- Title \_\_\_\_\_
- Location of Deed \_\_\_\_\_
- Mortgage \_\_\_\_\_
  
- Location \_\_\_\_\_
- Title \_\_\_\_\_
- Location of Deed \_\_\_\_\_
- Mortgage \_\_\_\_\_
  
- Location \_\_\_\_\_
- Title \_\_\_\_\_
- Location of Deed \_\_\_\_\_
- Mortgage \_\_\_\_\_

#### b. Bank Accounts

- Bank Name: \_\_\_\_\_
- Account Title: \_\_\_\_\_
- Account Number: \_\_\_\_\_
- *Is there a Designated Beneficiary? If so, who? If possible, attach a stamped Beneficiary Designation Form to this sheet*

- **Bank Name:** \_\_\_\_\_
- **Account Title:** \_\_\_\_\_
- **Account Number:** \_\_\_\_\_
- *Is there a Designated Beneficiary? If so, who? If possible, attach a stamped Beneficiary Designation Form to this sheet*
- **Bank Name:** \_\_\_\_\_
- **Account Title:** \_\_\_\_\_
- **Account Number:** \_\_\_\_\_
- *Is there a Designated Beneficiary? If so, who? If possible, attach a stamped Beneficiary Designation Form to this sheet*

**c. Location Safe Deposit Box(es) – title on the Box(es)**

- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

**d. Investment Accounts**

- **Bank Name:** \_\_\_\_\_
- **Account Title:** \_\_\_\_\_
- **Account Number:** \_\_\_\_\_
- *Is there a Designated Beneficiary? If so, who? If possible, attach a stamped Beneficiary Designation Form to this sheet*
- **Bank Name:** \_\_\_\_\_
- **Account Title:** \_\_\_\_\_
- **Account Number:** \_\_\_\_\_
- *Is there a Designated Beneficiary? If so, who? If possible, attach a stamped Beneficiary Designation Form to this sheet*
- **Bank Name:** \_\_\_\_\_
- **Account Title:** \_\_\_\_\_
- **Account Number:** \_\_\_\_\_
- *Is there a Designated Beneficiary? If so, who? If possible, attach a stamped Beneficiary Designation Form to this sheet*

**e. Retirement /Pension Accounts**

- **Bank Name:** \_\_\_\_\_
- **Account Title:** \_\_\_\_\_
- **Account Number:** \_\_\_\_\_
- *Who is the Designated Beneficiary? If possible, attach a stamped Beneficiary Designation Form to this sheet*

- **Bank Name:** \_\_\_\_\_
- **Account Title:** \_\_\_\_\_
- **Account Number:** \_\_\_\_\_
- *Who is the Designated Beneficiary? If possible, attach a stamped Beneficiary Designation Form to this sheet*

- **Bank Name:** \_\_\_\_\_
- **Account Title:** \_\_\_\_\_
- **Account Number:** \_\_\_\_\_
- *Who is the Designated Beneficiary? If possible, attach a stamped Beneficiary Designation Form to this sheet*

**f. Life Insurance**

- **Bank Name:** \_\_\_\_\_
- **Policy Type:** \_\_\_\_\_
- **Policy Number:** \_\_\_\_\_
- *Who is the Designated Beneficiary? If possible, attach a stamped Beneficiary Designation Form to this sheet*

- **Bank Name:** \_\_\_\_\_
- **Policy Type:** \_\_\_\_\_
- **Policy Number:** \_\_\_\_\_
- *Who is the Designated Beneficiary? If possible, attach a stamped Beneficiary Designation Form to this sheet*

- **Bank Name:** \_\_\_\_\_
- **Policy Type:** \_\_\_\_\_
- **Policy Number:** \_\_\_\_\_
- *Who is the Designated Beneficiary? If possible, attach a stamped Beneficiary Designation Form to this sheet*

**g. Art, Fine Jewelry and Collectibles (Include contact information of who to go to for appraisal, insurance, and/or sales purposes)**

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**h. Family Heirlooms (identify what they may be and any pertinent information)**

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**i. Settlement Agreements/Law Suits**

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**j. Debts/Loans/Mortgages Owed to you**

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**II. LIABILITIES**

**a. Credit Cards (List name, account number, account holder)**

**III. DIGITAL ASSETS (Describe email accounts, websites, credit card awards, etc. and accessibility)**

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**IV. ESTATE PLANNING DOCUMENTS (INCLUDE TITLE OF EACH DOCUMENT, DATE EXECUTED, AND LOCATION OF ORIGINALS)**

- V. CONTACT INFORMATION**
- a. Attorney**
  
  - b. Financial Advisor**
  
  - c. Insurance Advisor**
  
  - d. Accountant**
  
  - e. Health Insurance**
  
  - f. Long Term Care Insurance**
  
  - g. Primary Care Physician**
  
  - h. Other Important Contacts**