



## DIRECTIONS TO YORK COUNTY OFFICE

1700 George Washington Memorial Highway, Suite D  
York County, VA 23693  
(757) 898-0898

**From I-64:** (East or West), take the Route 17, George Washington Memorial Highway exit North toward Yorktown (258B). After passing through five traffic signals the office complex will be about another 1/4 mile ahead on your right.

**From Victory Blvd.:** Turn south onto Route 17, George Washington Memorial Highway (toward I-64). At the second traffic signal (Coventry Blvd.) make a U-turn, heading North on Route 17. The office complex will be about 1/4 mile ahead on your right.

**From Route 17 - North of Victory Blvd:** Proceed south on Route 17. Cross Victory Blvd. and proceed to the second traffic signal (Coventry Blvd.). Make a U-turn, heading North on Route 17. The office complex will be about 1/4 mile ahead on your right.

**Landmarks:** The office complex sits between the Royal Farms and Speedway gas station/convenience store. Look for a brick building with green awnings.

## DIRECTIONS TO GLOUCESTER OFFICE

Office is Open by Appointment Only

6558 Main Street, Suite 2  
Gloucester Courthouse, VA 23061  
(804) 824-9439

**From North of Gloucester:** Take George Washington Memorial Hwy / US-17 S toward Gloucester Courthouse. Left turn onto Business 17. Follow Business 17 partially around the courthouse circle, remaining on Business Route 17 (Main Street). 6558 Main St is on the right shortly after you exit the circle. Parking is available behind the building or on the street.

**From South of Gloucester:** Take George Washington Memorial Hwy / US-17 N toward Gloucester Courthouse. Right turn onto Business 17. Follow Business 17 through downtown. Office will be on your left, just prior to the courthouse circle. Parking is available behind the building or on the street.

**Landmarks:** We are located in the Morgan Building. The Good Life Kitchen is across the hall.

## **DIRECTIONS TO McLAWS OFFICE**

**Office is Open by Appointment Only**

**430 McLaws Circle, Suite 100  
Williamsburg, VA 23185  
(757) 645-4520**

From I-64 East or West: Follow 64 to VA-199 W via EXIT 242A toward Williamsburg/ Jamestown. Once on 199, merge onto US 60 – Pocahontas Trail (toward Williamsburg / Busch Garden). Take the first right onto McLaws Circle. Go about a third of a mile; 430 McLaws Circle is on your left. When you enter the parking lot, look to the end of the parking lot. You will see a building with the name “Leebcor” on the top. Our office has a separate entrance to the right of the main entrance.

## Estate Administration Intake Form

Your Name \_\_\_\_\_

Your Relationship to the Decedent \_\_\_\_\_

Decedent's Name \_\_\_\_\_

Date of Birth \_\_\_\_\_ Date of Death \_\_\_\_\_

Decedent's Address at time of death

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Do you have a death certificate? (if so, please bring with you) \_\_\_\_\_

Does the Decedent have Last Will & Testament? (if so, please bring with you) \_\_\_\_\_

Does the Decedent have a Trust? (if so, please bring with you) \_\_\_\_\_

Is a Court File already assigned? # \_\_\_\_\_

Decedent's Family and Beneficiaries. *Please list the decedent's spouse, children, and any other person named in the Decedent's Last Will and Testament. If the Decedent has no spouse and no children, please include his or her closest living relatives, such as grandchildren, parents, or siblings. Attach additional pages if necessary.*

Name \_\_\_\_\_ Deceased? Yes/No

Relationship to the Decedent \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

Name \_\_\_\_\_ Deceased? Yes/No

Relationship to the Decedent \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

Name \_\_\_\_\_ Deceased? Yes/No

Relationship to the Decedent \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

Name \_\_\_\_\_ Deceased? Yes/No

Relationship to the Decedent \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

## Financial Information

If you need more room, add additional sheets.

### Real Estate

Address \_\_\_\_\_  
Other co-owners of the property \_\_\_\_\_  
Approximate value \$ \_\_\_\_\_ If applicable, mortgage balance \$ \_\_\_\_\_

Address \_\_\_\_\_  
Other co-owners of the property \_\_\_\_\_  
Approximate value \$ \_\_\_\_\_ If applicable, mortgage balance \$ \_\_\_\_\_

### Checking/Saving Accounts

Type of account \_\_\_\_\_ Institution \_\_\_\_\_ Account # \_\_\_\_\_  
Other co-owners of the account \_\_\_\_\_  
POD (pay on death) or TOD (transfer on death) designation? Yes/No  
If a POD or TOD, who is designated? \_\_\_\_\_  
Balance on *date of death* \$ \_\_\_\_\_

Type of account \_\_\_\_\_ Institution \_\_\_\_\_ Account # \_\_\_\_\_  
Other co-owners of the account \_\_\_\_\_  
POD (pay on death) or TOD (transfer on death) designation? Yes/No  
If a POD or TOD, who is designated? \_\_\_\_\_  
Balance on *date of death* \$ \_\_\_\_\_

Type of account \_\_\_\_\_ Institution \_\_\_\_\_ Account # \_\_\_\_\_  
Other co-owners of the account \_\_\_\_\_  
POD (pay on death) or TOD (transfer on death) designation? Yes/No  
If a POD or TOD, who is designated? \_\_\_\_\_  
Balance on *date of death* \$ \_\_\_\_\_

### Vehicles

Description \_\_\_\_\_  
Other co-owners of the vehicle \_\_\_\_\_  
Approximate value \$ \_\_\_\_\_ If applicable, loan balance \$ \_\_\_\_\_

Description \_\_\_\_\_  
Other co-owners of the vehicle \_\_\_\_\_  
Approximate value \$ \_\_\_\_\_ If applicable, loan balance \$ \_\_\_\_\_

**Life Insurance**

Institution \_\_\_\_\_ Policy # \_\_\_\_\_ Benefit value \$ \_\_\_\_\_  
Beneficiaries \_\_\_\_\_

Institution \_\_\_\_\_ Policy # \_\_\_\_\_ Benefit value \$ \_\_\_\_\_  
Beneficiaries \_\_\_\_\_

**Retirement Accounts (IRAs, 401Ks, TSPs, etc.)**

Institution \_\_\_\_\_ Account # \_\_\_\_\_  
Beneficiaries \_\_\_\_\_  
Value \$ \_\_\_\_\_

Institution \_\_\_\_\_ Account # \_\_\_\_\_  
Beneficiaries \_\_\_\_\_  
Value \$ \_\_\_\_\_

**Other Assets (stocks, bonds, CDs, annuities, etc.)**

Asset \_\_\_\_\_ Institution \_\_\_\_\_ Account # \_\_\_\_\_  
Other co-owners of the asset \_\_\_\_\_  
POD/TOD or beneficiary, if applicable \_\_\_\_\_  
Value of asset on *date of death* \$ \_\_\_\_\_

Asset \_\_\_\_\_ Institution \_\_\_\_\_ Account # \_\_\_\_\_  
Other co-owners of the asset \_\_\_\_\_  
POD/TOD or beneficiary, if applicable \_\_\_\_\_  
Value of asset on *date of death* \$ \_\_\_\_\_

Asset \_\_\_\_\_ Institution \_\_\_\_\_ Account # \_\_\_\_\_  
Other co-owners of the asset \_\_\_\_\_  
POD/TOD or beneficiary, if applicable \_\_\_\_\_  
Value of asset on *date of death* \$ \_\_\_\_\_

**Debts** (other than mortgages or car loans already listed above)

Debt type \_\_\_\_\_ Lender \_\_\_\_\_ Account # \_\_\_\_\_  
Balance \$ \_\_\_\_\_

Debt type \_\_\_\_\_ Lender \_\_\_\_\_ Account # \_\_\_\_\_  
Balance \$ \_\_\_\_\_

Debt type \_\_\_\_\_ Lender \_\_\_\_\_ Account # \_\_\_\_\_  
Balance \$ \_\_\_\_\_