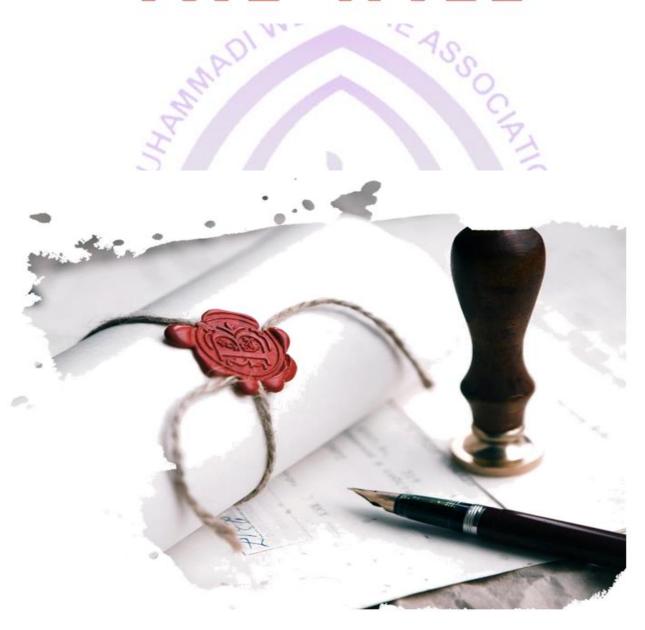
# ISLAMIC LAWS OF THE WILL



**TESTAMENT** 



# (Wasiyatnama)

Bequest is prescribed for you when death approaches one of you...

WELFARE

(Al Baqarah: 180)

| AD!               | 150         |
|-------------------|-------------|
| Name of Testator: |             |
| Father's Name :   |             |
| #5 <sub>W</sub>   | Date/Place: |
|                   | Signature : |
|                   |             |
|                   |             |
|                   |             |
|                   |             |
|                   |             |
|                   |             |
|                   |             |

Note: This form is solely for assisting in the preparation of your Will. You must authorize and adhere to your local authorities' requirements.



# **Important Instructions Regarding Will**

Here under we give in short some guidelines for a person who is going to execute a Will. For details please see our Presentation and Masail of will in Islamic practical law books (Syed Sistani) (Rehbar).

**Syed Sistani:** https://www.sistani.org/english/book/48/8235/ **Rehbar:** https://www.leader.ir/en/book/32/Practical-Laws-of-Islam

- 1. Will is one of the important commandments of Islam and by executing a Will one gets the blessings of Allah s.w.t.
- 2. Will should be executed well in advance. Imam Sadiq a.s. said, "It is compulsory for every Muslim that his will should be under his pillow while he goes to sleep".
- 3. A testator can be queath only one third portion of his property.
- 4. A testator should be Baligh (mature under Islamic tenets).
- 5. The Will should be executed by the testator with his own free will and choice. He should not be compelled to Will.
- 6. Will should be full of wisdom and common sense.
- 7. The person/persons for whom the Will is to be executed should be deserving and capable.
- 8. The will should be executed in such a manner that it should not create any dispute or differentiation.
- 9. The testator should put clauses in his will not only for the performance of good deeds (sawab), but he should also specifically mention about the rights of human beings and rights of Allah s.w.t.
- 10. There should not be any sort of transgression, deviation or injustice in a Will.
- 11. In order to give effect to his will the testator should appoint an adult, sane, sensible Muslim and trustworthy person as his executor (wasi).
- 12. In the end the testator should write some ethics and experiences of his life. He should

take guidance from the Wills of the great personalities of Islam such as Will of Hazrat Ali A.S. (from Nahjul Balagha) and other Imams and scholars.

# **Formal Requirements**

- 1. the will must be in writing;
- 2. the will must be signed by the testator or by some other person in the presence and by the direction of the testator;
- 3. the will must be signed in the presence of two or more witnesses who are present at the same time; and
- 4. each witness must attest and sign the will in the presence of the testator.



# THE WILL

|        | ORIGINAL   |  | (РНОТО)                      |
|--------|--|--|------------------------------|
| П      |  | -1 EAR   |                              |
|        | 1st COPY  2nd COPY  and place of death: filled by executor or heir)  Name: | WELLARE  |                              |
|        | 2nd COPY   | 20,  |                              |
| Date   | and place of death:  |  |                              |
| (to be | filled by executor or heir)  | THE STATE OF THE S | 2                            |
| Full 1 | Name:  |  |                              |
| Fathe  | er's name :  |  |                              |
| Date   | of Birth:  | Place of Birth:  |                              |
| Prese  | ent Address:   |  |                              |
|        |  |  |                              |
|        |  |  |                              |
| Dorm   |  |  |                              |
| r em   |  |  |                              |
| •••••  |  |  |                              |
| _      |  | Sect :   |                              |
|        |  |  |                              |
|        | r whose taqleed the testator is)   |  |                              |
| (1)    | One/Two/Three copy/cop   | pies of this Will has/have been made in case any d   | ifference is found in the    |
|        | copies of the Will the ori   | ginal copy should be treated as reliable.  |                              |
| (2)    | The first copy of the Wil  | l has been given to Mr./Ms.  |                              |
| (3)    | The second copy has bee  | en given to Mr./Ms.  |                              |
|        | (Note: The original copy of the  | he Will should be kept by the testator himself)  |                              |
| (4)    | All the details of my prop   | perty, trusts and transactions, assets etc. have been  | written in the enclosures of |
|        | this Will. Apart from the  | se if any other transaction is proved that should als  | so be taken into account.    |
|        | Date and place of execut   | ion of Will  |                              |
|        |  |  | Signature of testator        |



| (i) Date and place of amendments made in the Will                        |           |
|--|-----------|
|  | Signature |
| (ii) The following amendments were made:                                 |           |
|  |           |
| (iii) Date and place of amendments (second time) made in the Will        |           |
|  |           |
|  |           |
|  |           |
|  |           |
|  | Signature |
| (iv) The following amendments were further made:                         |           |
|  |           |
|  |           |
| (You can ADD more pages with format for further changes and amendments). |           |



#### **First Part**

#### APPOINTMENT OF EXECUTOR

I, hereby appoint the following person/persons as my trusted executors (wasi) who would be authorized to look after all my assets, its acquisitions, disbursements and justified distribution amongst my heirs. All the heirs are instructed to co-operate with the executor. In case of any dispute Mujtahid or his Vakil / Religious Scholar should be consulted.

| 1. Name & Father Name of the Executor:                                    |
|---|
| Address:  |
|   |
| Z Z   |
| Name & Father Name of the Second executor                                 |
| (in case first executor apologizes)                                       |
| Address:  |
|   |
|   |
| 3. Name of Mujtahid or his Vakil / Religious Scholar :                    |
| (In case neither of the above executor/s available or apologize)          |
|   |
| (Non applicable items should be marked $(\checkmark)$ or struck off $(X)$ |



## **Second Part**

# APPOINTMENT OF GUARDIAN

| My Father Mrwould function as a guardian of my minor children till they reach puberty in case of his old age or death he is unable to remain   |
|--|
| their guardian the following persons would function as their guardian:   |
| (1) Mr./Ms   |
| (2) Mr./Ms.  |
| (if he/she is not available.)  |
| (3) My executor (wasi) (according to part) one would function as their guardian.   |
| The appointed guardian (except my father) shall handover the responsibilities of all my assets to my son/s,  |
| daughter/s   |
| and the remaining children when they reach puberty.  |
| The guardian of my children is requested to look after my children properly and make arrangements for their academic and religious education. In particular, they should be made to learn the Holy Qur'an and Shia Theology and its essential propositions and problems. He should also safeguard all the assets belonging to my children and if required make expenditures to fulfill their genuine needs but with their consent. |
| ☐ In case of any dispute arises between my children and guardian a mujtahid (jurist) or his vakil should be consulted whose decision would be binding on both.   |
|  |



# Third part

# EXPENDITURES TO BE MADE OUT OF ORIGINAL ASSETS

|    |       | ☐ First of all my executor shall make the following payments out of my ori   | =                         |
|----|-------|--|---------------------------|
|    |       | \$ approx.) (as far as possible ap   | prox. amounts to mention) |
| 1  | . E   | xpenditure on my ghusl, coffin and burial. \$  |                           |
|    |       | CIFAD  |                           |
|    | I o   | rdain my place of burial to be at the following Islamic cemetery if accomplishal   | ole:                      |
|    |       | 01.40  |                           |
|    |       | Cemetery & Grave No (if any)   |                           |
|    |       | Address  | 7                         |
|    |       | Funeral Service (if any)   | 0                         |
|    |       | The distributable property should be distributed from its one third portion \$. (as per part four of this will)  | 7                         |
|    |       | The original assets should be distributed (from this part of will Other Misc. expenses of the deceased (such as ambulance, Majalis, Fateha (rec Qur'an) Charities etc.) should be distributed as per part four of this Will.  \$ | \$<br>citing of           |
|    |       | My Husband/Wife should bear these expenses.  |                           |
| 2. | Me    | char of my wife .\$  |                           |
|    |       | Has been paid   □ To be paid   |                           |
| 3. |       | bts/Qarz Hasana (loan W/O interest) are as follows:  |                           |
|    |       | mes and address of lenders :   |                           |
|    | (i)   |  | \$                        |
|    | (ii)  |  | \$                        |
|    | (iii) | )  | \$                        |
|    |       | No loan is payable<br>Loans are to be paid   |                           |
| 4. | Rac   | dde Mazalim (compensation for financial loss effected on anyone)   |                           |
|    | (i)   |  | \$                        |
|    |       | The executor to fill the amounts where no amount is mentioned by testator.   |                           |



| 5.    | To be payable                               |   | Not payable               |   |
|-------|---|---|---------------------------|---|
|       |   | Saham-e-Imam  |                           | \$  |
|       |   | Saham-e-Saadaat   |                           | \$  |
|       |   | Zakat   |                           | \$  |
|       |   | Fitra   |                           | \$  |
|       |   |   | on                        |   |
|       | * Annual date of payr                       | ment of Zakat* falls or   | n                         | S   |
|       | * Khums/Zakat* has my khums till the da     |   | ence my executor should   | take account from the annual date of  |
|       |   | ot been paid regularly,<br>the payable amount a                 |                           | een written on separate paper. So my  |
|       | * Khums/Zakat never                         | taken out.  |                           | Z   |
| 6.    | ☐ The executor does<br>Performing Hajj.     | nuine person to be de<br>the computation and i                  | if he finds that Hajj was | due then he should depute someone for to then the expenses would be taken out |
|       |   | riginal assets but if worms the one third port                  | =                         | m his city then the expenses would be   |
| 7.    | -   | the distributable asset   | ts should be disbursed fr | distribution of the inherited property: om part four of this Will.            |
| 8.    | Taxes and dues pertaining                   | ng to the government.   |                           |   |
|       | _   | □ not payable ortion of the distributal rom original assets (pa | ble assets should be disb | oursed from part IV of this Will.   |
| 9.    | ☐ One third portion of ☐ To be paid from or | of the distributable assignal assets (part thre                 | ets should be paid from   | part IV (of this Will)  |
| * See | e Tauzihul Masael of Your Mu                | ıjtahıd   |                           |   |



#### Part four

#### WILL REGARDING ONE-THIRD PORTION OF THE DISTRIBUTABLE ASSETS

After the payments of all the dues of the third part of the Will and on the authority by dint of my rights on the one-third portion of the balance of my assets, I, hereby, bequeath that it is the duty of my Executor to follow the guidelines hereunder mentioned on the said 1/3 portion:

| I Will for the one-third portion  | ICI FAD. |
|-----------------------------------|----------|
| I Will Waqf to                    | MELLINE  |
| I Will only for \$                |          |
| I Will as per the following amoun | ats:     |

If the total of the under-mentioned expenditures exceeds the above-mentioned fixed amounts. For example, if Will is made for 5.50,000- but the total of the expenditure comes to 70,000- then in this condition the reductions will be made by ticking ( $\checkmark$ ) in the <u>columns</u> written on the right side.

## **Endowment (WAQF) of property or percentage Should Be Mentioned Separately.**

#### Payments in the case of reduction in fixed amounts

| Payment Canceled | Little<br>Reduction | Total<br>Payment | Details of the Will                          | Amounts (if possible) |
|------------------|---------------------|------------------|--|-----------------------|
|                  |                     |                  | 1. Expenses on 'Ghusl', Coffin, and burial.  | \$                    |
|                  |                     |                  | 2. On ambulance, Majlis, Fateha and charitie | s etc. \$             |
|                  |                     |                  | These expenses should not exceed             | \$                    |
|                  |                     |                  | 3. Charity on the night of burial.           | \$                    |
|                  |                     |                  | 4. Wages on any other things                 | \$                    |
|                  |                     |                  | 5. Remuneration of executor                  | \$                    |
|                  |                     |                  | 6. Wages for qaza Namaz)  □ Qaza since       | \$                    |
|                  |                     |                  | 7. Wages for undone fasts.                   |                       |
|                  |                     |                  | □ Qaza fordays / months                      | \$                    |
|                  |                     |                  | 8. Obligatory Hajj                           | \$                    |
|                  |                     |                  | ☐ Deputed to perform Haj from his city.      | \$                    |
|                  |                     |                  | 9. Obligatory Kaffaras (Expiations)          | \$                    |
|                  |                     |                  | □ Kaffara of Hajj (Qurbani)                  | \$<br>\$.             |
|                  |                     |                  | □ Kaffara of fasts                           | \$                    |



|     | □ Kaffara of Nazr/pledge etc.               | \$ |
|-----|---|----|
|     | □ No Kaffara is due                         |    |
|     | 10. Optional prayer                         | \$ |
|     | □ <b>На</b> ј                               | \$ |
|     | □ Umrah                                     | \$ |
|     | □ Ziarat                                    | \$ |
|     | 11. To my wife Ms                           |    |
|     | ☐ In addition to her share of Inheritance   | \$ |
|     | 12. To my following children                | \$ |
| 5   | (in addition to their share of inheritance) |    |
| 5   | a) To                                       |    |
| 5   | b) To                                       |    |
|     | c) Tod) To                                  |    |
|     | 13. To my following relatives               | 4  |
| - N |   | \$ |
|     | (in addition to their share of inheritance) | ψ  |
|     | a) To                                       |    |
|     | b) To                                       |    |
|     | d) To                                       |    |
|     |   |    |
|     | 14 Following expenses in the way of Allah   |    |
|     | s.w.t.                                      | \$ |
|     | a) To                                       |    |
|     | b) To                                       |    |
|     | d) To                                       |    |
|     |   |    |

Note: After the disbursement of the above mentioned expenses the residue should be distributed among my heir according to the ruling of my Mujtehad.



# **DETAILS OF BANK ACCOUNT (NON COMMERCIAL)**

| S.No.  | Name of Bank | Account No. | Names of Signatory |
|--------|--------------|-------------|--------------------|
| 1.     |              |             |                    |
| 2.     |              |             |                    |
| 3.     | I WELLINE    | j           |                    |
|        | MAL          | 3.50        |                    |
| Date : |              | C           | (Signature)        |

Note: Details of my business accounts may be obtained from the office account books which would be taken in respect of business assets.



# **DETAILS OF SHARES**

| S.No.  | Name of Company                                | Quantity of Shares Ori | ginal Value        | Names of join | nt shareholders  |  |
|--|--|------------------------|--------------------|---------------|------------------|--|
| 1.   |  |                        |                    |               |                  |  |
| 2.   |  | MELEAR                 | . <mark></mark>    |               |                  |  |
| 3.   |  |                        | EAO.               |               |                  |  |
| 4.   |  |                        |                    |               |                  |  |
| 5.   |  |                        |                    |               |                  |  |
| 6.   |  |                        |                    |               |                  |  |
| Date:  | Z  |                        |                    | Z-            | (signature)      |  |
|  |  |                        |                    |               |                  |  |
|  |  | Enclosure No. 3        |                    |               |                  |  |
|  | DETAII   | LS OF INSURANCE        | POLICIES           |               |                  |  |
| S.No.  | Name of insurance Co.                          | Policy No.             | Date of Ma         | turity Amo    | ount (of policy) |  |
| 1.   |  |                        |                    |               |                  |  |
| 2.   |  |                        |                    |               |                  |  |
| 3.   |  |                        |                    |               |                  |  |
| □ Khums has been paid / not paid on paid-up premium. |  |                        |                    |               |                  |  |
| □ Th   | e amount received from insurance ybody's name. |                        | part of the assets | even though i | t may be in      |  |
| Date : .   |  |                        |                    | _             | (signature)      |  |
|  |  |                        |                    |               |                  |  |
|  |  |                        |                    |               |                  |  |



## DETAILS OF PROPERTY AND AMOUNT TO BE RECOVERED

The following items of my personal, Belongings/property are to be recovered which should be added in my assets after recoveries.

Meher

Detail

The following details are apart from my business accounts:

Names and Address of Debtor

\*My husband

S no.

1.

2.

| 3.     |                  |                 |                               |   |                                |              |
|--------|------------------|-----------------|-------------------------------|---|--------------------------------|--------------|
| 4.     |                  | 2/              |                               |   | 19                             |              |
| * Only | for females - ir | n case if meher | is paid or excused i          | t is to be omitted.                               |                                |              |
| Date : |                  |                 |                               |   | (s                             | ignature)    |
|        |                  |                 | Enclosu                       | re no. 5  |                                |              |
|        | DETAIL           | S OF ITEM       | S WHICH WEF                   | RE NOT GIFTED V                                   | WHILE LIVING                   | <b>G.</b>    |
| non-go |                  | ments or they   | are presumed that I           | if they are in the name<br>had given these things |                                |              |
| S No.  | Detail           |                 | Name & Address o of the items | f the possessor                                   | Name & address persons who are |              |
| 1.     |                  |                 |                               |   |                                |              |
| 2.     |                  |                 |                               |   |                                |              |
| 3.     |                  |                 |                               |   |                                |              |
| 4.     |                  |                 |                               |   |                                |              |
| Date : |                  |                 |                               |   | (s                             | ignature)    |
|        |                  |                 |                               |   |                                | 15 I D 2 G A |



Amount

#### DETAILS OF THE ITEMS WHICH WERE GIFTED WHILE LIVING

The following items / properties have been gifted by me during my lifetime. I have no claim on them even though they are written in my name or in the name of somebody else in government or non-government documents or are known as my property.

| S.1   | Vo. | Detail        | Gifted to      |   | Date    | Witness |
|-------|-----|---------------|----------------|---|---------|---------|
| 1.    |     | Ornaments     | T <sub>D</sub> | S |         |         |
| 2.    |     | Garments etc. |                |   |         |         |
| 3.    |     | Dowry         | ×              |   | Z       |         |
| 4.    |     | Vehicle       |                |   | 0       |         |
| 5.    |     | Shares        |                |   |         |         |
| 6.    |     |               |                |   |         |         |
| 7     |     |               |                |   |         |         |
|       |     |               |                |   |         |         |
|       |     |               |                |   |         |         |
| Date: |     |               |                |   | nature) |         |



#### **DETAILS OF ENTRUSTED DEPOSITS**

(Apart from what have been entered in my business account books)

Some persons had entrusted with me the following securities which are preserved by me. Those should be returned to their respective owners by my Executor immediately after my death or those should be disbursed as per the instructions given by me in this regard.

| S.No. | Names & Address<br>of the owner | Details of securities | Instructions |
|-------|---------------------------------|-----------------------|--------------|
| 1.    |                                 |                       |              |
| 2.    |                                 |                       |              |
| 3.    |                                 |                       |              |
| 4.    |                                 | 1 2                   |              |
|       |                                 |                       |              |

| Samuel Property | Date : |  | (signature) |
|-----------------|--------|--|-------------|
|                 |        |  |             |
|                 |        |  |             |
|                 |        |  |             |
|                 |        |  |             |
|                 |        |  |             |

#### **MY DEEP WISH**

If a testator wants to Will in the following matte\$ for any particular person, he may fill up his name accordingly:

| 1. I wish my namaz-e-Mayyat be performed by Maulana |                            |
|---|----------------------------|
| 2. I wish my Suyum Majlis be addressed by Maulana   |                            |
| 3. I wish my chehlum Majlis be addressed by Maulana | 700                        |
| 4. I wish for my Haj Mr                             | be deputed (if he agrees.) |
| 5. I wish for my Umrah Mr                           | be deputed (if he agrees.) |
| 6. I wish Ziarat of                                 | be done by                 |
| (Name of place)                                     |                            |
|   | 7                          |
| Mr  | . if he agrees.            |
|   |                            |
|   |                            |
|   |                            |
| Date :  | (Signature)                |



#### **APOLOGIES**

I earnestly request all my relatives, friends and other persons concerned that if, unintentionally, they are bodily, spiritually or mentally hurt by me at any time I seek that I am excused by them. Further I request my executor / heir to extend my apologies to the following persons:

| S.No.  | Names and addresses   |  |  |
|--|---|--|--|
| 1.   | <u> </u>  |  |  |
| 2.   |   |  |  |
| 3.   |   |  |  |
| 4.   |   |  |  |
| 5.   |   |  |  |
|  | <u> </u>  |  |  |
|  | earnestly, request my Muslim brothers who have been, intentionally or unintentionally, slandered, d, and defamed by me. I seek that I am excused by them. |  |  |
| I also excuse all my relatives, friends, and brothers who might have slandered, smeared, or defamed me or afflicted me in any manner whatsoever. |   |  |  |
| I advise   | e to my executor (Wasi)   |  |  |
|  |   |  |  |
|  |   |  |  |
|  |   |  |  |
|  |   |  |  |
|  |   |  |  |
| Date:.   | (Signature)   |  |  |