FAMILY EMERGENCY DOSSIER

Everything your family needs. In one place. Ready when it matters most.

This dossier belongs to:

______________________________ &

____

Home address:

____

COPY HELD BY	ALSO HELD BY
______________________	______________________
Relationship: ________________	Relationship: ________________

Document prepared: __________________ Next review due: __________________

⚠ BEFORE THIS DOCUMENT IS NEEDED — DO THESE THREE THINGS FIRST

1 Confirm your Will and Enduring Power of Attorney are EXECUTED, SIGNED, and WITNESSED — store originals with your solicitor.

2 Confirm superannuation beneficiary nominations are in place with each fund. Superannuation does NOT follow the Will.

3 Ensure every person listed on the cover page has their copy and knows where it is.

A NOTE FROM BUSINESS CLASS GROUP

In more than thirty years working with Queensland families on their most important asset — their home we have sat at many kitchen tables in difficult moments.

When something happens to a loved one, the practical demands arrive before the grief has even settled. Where is the Will? Who holds the Power of Attorney? What bank accounts exist? Where is the insurance policy? What do we do about the house?

We created this Family Emergency Dossier because we have watched too many families search for answers in filing cabinets, email inboxes, and shoebox archives — at 2am, in shock, trying to hold things together.

Fill it in. Store it safely. Give a copy to someone you trust. The hardest part is not the paperwork — it is the conversation. Start with one section, one cup of tea. A partially completed dossier is infinitely more useful than a blank one.

This document is our gift to you and your family. No strings. No obligation. Just love for our community.

CONTENTS

TIER 1 — EMERGENCY ACCESS

Fill every blank in this section before filing this document away. These are the details needed in the first hours of a medical or personal emergency.

1.1 THE PEOPLE

Person	Mobile	Email	Notes
________________ Parent / Person 1	________________	________________	________________
________________ Parent / Person 2	________________	________________	________________
________________ Primary contact	________________	________________	Primary — call first
________________ Secondary contact	________________	________________	________________
________________ Other	________________	________________	________________
Pets: ________________	Carer if needed: ________________	Vet: ________________	Feed/care immediately

1.2 GP & MEDICAL — IMMEDIATE ACCESS

Provider	Name / Practice	Phone	Address
GP Practice	________________	________________	________________
Person 1's GP	________________	________________	________________
Person 2's GP	________________	________________	________________
Nearest Hospital	________________	________________	________________
Specialist 1	________________	________________	________________
Specialist 2	________________	________________	________________
Ambulance / Emergency	000	13 HEALTH: 13 43 25 84	Non-emergency health advice

1.3 PERSON 1 — MEDICATIONS & MEDICAL HISTORY

Medication	Dosage	Prescribing Doctor	Frequency

Known Allergies	Medical History / Conditions

1.4 PERSON 2 — MEDICATIONS & MEDICAL HISTORY

Medication	Dosage	Prescribing Doctor	Frequency

Known Allergies	Medical History / Conditions

1.5 HEALTH INSURANCE & MEDICARE

Type	Provider	Member / Policy Number	Phone
Medicare — Person 1	Medicare	_______________	132 011
Medicare — Person 2	Medicare	_______________	132 011
Private Health Insurance	_______________	_______________	_______________
Ambulance Cover	_______________	_______________	_______________
DVA (if applicable)	_______________	_______________	_______________

1.6 HOME

Item	Details
Address	_______________
Home Insurance	Insurer: ____________ | Policy: ____________ | Phone: ____________
Gate / property access code	_______________
Spare key held by	_______________
Council	Council name: ____________ | Rates account: ____________ | Phone: ____________
Home maintenance contact	____________ | Phone: ____________

1.7 GOVERNMENT SERVICES — CRITICAL ACCESS

Service	CRN / Reference	Login / Account	Notes
Centrelink — Person 1	_______________	myGov linked	Notify within 14 days of a death
Centrelink — Person 2	_______________	myGov linked	Notify within 14 days of a death
myGov — Person 1	_______________	_______________	
myGov — Person 2	_______________	_______________	
ATO / myTax	_______________	Via myGov	TFN P1: _________ P2: _________

⚠ Centrelink must be notified within 14 days of a death. Failure to notify can result in overpayment demands against the estate.

1.8 SAFE & SECURE STORAGE

Item	Location	Combination / Key / Access
Home safe	________________	________________
Bank safety deposit box	Branch: ________________ Box #: ________________	Key location: ________________
Important documents stored elsewhere	________________	________________

TIER 2 — ESTATE ADMINISTRATION

This section gives the executor what they need to administer the estate. Confirm legal documents are properly executed before relying on anything in this section.

2.1 LEGAL DOCUMENTS

⚠ A Will and Enduring Power of Attorney that are not properly executed and witnessed are worthless. Confirm with your solicitor that originals are signed, witnessed, and stored safely before distributing this dossier.

Document	Person 1 — Status	Person 2 — Status	Location / Notes
Will	________________	________________	Originals held by: ________________
Executor named in Will	________________	________________	Who: ________________
Enduring Power of Attorney (Financial)	________________	________________	Register with each financial institution
Enduring Guardianship (Health/Personal)	________________	________________	
Advance Care Directive	________________	________________	
Marriage Certificate	________________	________________	Location: ________________
Birth Certificates	________________	________________	Location: ________________
Divorce / Separation Papers (if applicable)	________________	________________	

2.2 SUPERANNUATION & PENSIONS

⚠ Superannuation does NOT follow the Will. Binding beneficiary nominations must be lodged directly with each fund and renewed every three years. Non-binding nominations leave the decision to the fund trustee.

Fund / Provider	Member Number	Nomination Type	Nominated Beneficiary	Phone
________________	________________	☐ Binding ☐ Non-binding	________________	________________
________________	________________	☐ Binding ☐ Non-binding	________________	________________
Age Pension (Centrelink — P1)	CRN: ________________	N/A — notify on death	Ceases on death	132 300
Age Pension (Centrelink — P2)	CRN: ________________	N/A — notify on death	Ceases on death	132 300

2.3 PROPERTY

NOTE — How the title is held matters enormously.

Joint tenants: property passes directly to the surviving owner outside the Will. Tenants in common: each share passes through the estate. Confirm with your solicitor which applies to your properties.

Property	Address	Title — How Held?	Mortgage?	Insurer & Policy #
Home	________________	☐ Joint tenants ☐ Tenants in common ☐ Trust	☐ Yes ☐ No Lender: _______	________________

Investment property	________________	☐ Joint tenants ☐ Tenants in common ☐ Trust	☐ Yes ☐ No Lender: _______	________________
Other	________________	________________	☐ Yes ☐ No	________________

2.4 VEHICLES

Transfer registration promptly after a death. Confirm insurance is in the surviving person's name immediately.

Vehicle	Make / Model / Year	Rego Plate	Rego Expiry	Insurer & Policy #	CTP Insurer

2.5 PRECIOUS METALS & VALUABLES

NOTE

Physical assets must be listed in the estate. Store purchase receipts and this record separately from the items themselves. Tell the executor — not everyone — where items are held.

Item / Type	Description	Qty / Weight	Receipt #	Purchase Date	Est. Value	Storage Location
Gold	_______________ _	_______________ _	_______________ _	_______________ _	$_____ _	________________
Silver	_______________ _	_______________ _	_______________ _	_______________ _	$_____ _	________________
Jeweller y	_______________ _	_______________ _	_______________ _	_______________ _	$_____ _	________________
Other valuables	_______________ _	_______________ _	_______________ _	_______________ _	$_____ _	________________

2.6 BANK ACCOUNTS

Financial Institution	Account Type	Account Number	BSB	Online Access?
________________	________________	________________	_______________ _	☐ Yes ☐ No
________________	________________	________________	_______________ _	☐ Yes ☐ No
________________	________________	________________	_______________ _	☐ Yes ☐ No
________________	________________	________________	_______________ _	☐ Yes ☐ No

The executor must present the EPA or Grant of Probate to each institution. Many banks have dedicated bereavement teams — call them directly.

2.7 INVESTMENTS & OTHER ASSETS

Type	Institution / Broker	Account / Reference	Notes

2.8 INSURANCE POLICIES

Type	Insurer	Policy Number	Beneficiary / Notes
Home & Contents	________	________	________
Life Insurance — Person 1	________	________	________
Life Insurance — Person 2	________	________	________
Total & Permanent Disability (TPD)	________	________	________
Income Protection	________	________	________
Funeral / Burial Cover	________	________	See Section 5 if pre-purchased
Vehicle 1	________	________	________
Vehicle 2	________	________	________
Other	________	________	________

2.9 SUBSCRIPTIONS TO CANCEL

Cancel these after a death to avoid ongoing charges. Present a death certificate to each provider. Cancel direct debits at the bank simultaneously.

Service	Provider	Account / Reference	Payment Method	Monthly Cost	Contact
Internet / NBN	________	________	________	$______	________
Phone — Person 1	________	________	________	$______	________
Phone — Person 2	________	________	________	$______	________
Electricity	________	________	________	$______	________
Gas	________	________	________	$______	________
Streaming (Netflix etc.)	________	________	________	$______	________
Pay TV (Foxtel etc.)	________	________	________	$______	________
Newspaper / Magazine	________	________	________	$______	________
Other	________	________	________	$______	________
Other	________	________	________	$______	________

2.10 LIABILITIES & OUTSTANDING DEBTS

Debts form part of the estate and must be settled before assets are distributed.

Creditor	Account Number	Estimated Balance	Payment Method
________	________	$________	☐ Direct debit ☐ Manual

________________	________________	$________________	☐ Direct debit ☐ Manual
________________	________________	$________________	☐ Direct debit ☐ Manual
________________	________________	$________________	☐ Direct debit ☐ Manual

2.11 TAX

Item	Person 1	Person 2
Tax File Number (TFN)	________________	________________
myGov / ATO login	________________	________________
Accountant / Tax Agent	Name: ________________ Phone: ________________	
Last 3 years tax returns — location	________________	________________

3.1 PROFESSIONAL ADVISERS

Role	Name	Firm	Phone / Email	Scope
Solicitor (estate & Wills)	______________	______________	______________	Wills, EPAs, probate — FIRST CALL
Accountant / Tax Agent	______________	______________	______________	Tax returns, ATO matters
Financial Planner	______________	______________	______________	______________
Executor of Will	______________	______________	______________	______________

3.2 FAMILY CONTACTS

Name	Relationship	Mobile	Email

3.3 NEIGHBOURS & CLOSE FRIENDS

People to call in an emergency — those with a key, who check in regularly, or who should be notified quickly if someone is hospitalised.

Name	Relationship / Connection	Mobile	Email	Notes (key holder?)

3.4 FUNERAL NOTIFICATION LIST

Work through this list systematically after a passing. Tick each person when notified. Fill this section with the person while they are well.

Name	Relationship	Mobile	Email	Notify by	Done
______________	______________ _	______________	______________	☐ Call ☐ Text ☐ Email	☐
______________	______________ _	______________	______________	☐ Call ☐ Text ☐ Email	☐
______________	______________ _	______________	______________	☐ Call ☐ Text ☐ Email	☐
______________	______________ _	______________	______________	☐ Call ☐ Text ☐ Email	☐
______________	______________ _	______________	______________	☐ Call ☐ Text ☐ Email	☐

________________	________________ _	________________	________________	☐ Call ☐ Text ☐ Email	☐
________________	________________ _	________________	________________	☐ Call ☐ Text ☐ Email	☐
________________	________________ _	________________	________________	☐ Call ☐ Text ☐ Email	☐
________________	________________ _	________________	________________	☐ Call ☐ Text ☐ Email	☐
________________	________________ _	________________	________________	☐ Call ☐ Text ☐ Email	☐

SECTION 4 — DIGITAL & ONLINE ACCESS

⚠ SECURITY: Store this section in a sealed envelope in a fireproof safe, or with your solicitor. Do not photograph or email. Review whenever passwords change.

Service	Username / Email	Password or Location	2FA Method	Recovery Info
Phone PIN — Person 1	N/A	________________	N/A	N/A
Phone PIN — Person 2	N/A	________________	N/A	N/A
Email — Person 1	________________	________________	________________ _	________________
Email — Person 2	________________	________________	________________ _	________________
myGov — Person 1	________________	________________	________________ _	________________
myGov — Person 2	________________	________________	________________ _	________________
Internet Banking	________________	________________	________________ _	________________
Internet Banking (2nd)	________________	________________	________________ _	________________
Superannuation portal	________________	________________	________________ _	________________
Home insurance portal	________________	________________	________________ _	________________
Other subscriptions	________________	________________	________________ _	________________

Consider a password manager — store the master password separately from all devices. A sealed, handwritten envelope in a fireproof safe is a valid alternative.

SECTION 5 — FUNERAL & END-OF-LIFE WISHES

Fill this section with the person present, while they are well. The more detail recorded here, the fewer family disputes at the worst possible time.

5.1 Funeral Arrangements

Item	Details
Burial or cremation	☐ Burial ☐ Cremation ☐ Other: ____________
Funeral plots — pre-purchased?	☐ Yes — Certificate / receipt location: ____________ ☐ No
Cemetery name & address	________________
Plot reference / location	Person 1: ________________ Person 2: ________________
Funeral home / director	Name: ________________ Phone: ________________
Pre-paid funeral plan	☐ Yes — Policy: ____________ ☐ No
Clergy / celebrant	Name: ________________ Phone: ________________
Religious denomination / tradition	________________

5.2 Person 1 — Service Preferences

Item	Wishes
Songs to be sung at the service	________________
Additional music (instrumental / recorded)	________________
Readings (scripture, poem, other)	________________
Eulogy — who should deliver it	________________
Pallbearers	________________
Flowers / no flowers	________________
Dress code for attendees	________________
Wake / reception preferences	________________
Charitable donation in lieu of flowers	☐ Yes — Organisation: ____________ ☐ No

5.3 Person 2 — Service Preferences

Item	Wishes
Songs to be sung at the service	________________
Additional music (instrumental / recorded)	________________
Readings (scripture, poem, other)	________________
Eulogy — who should deliver it	________________
Pallbearers	________________
Flowers / no flowers	________________
Dress code for attendees	________________
Wake / reception preferences	________________
Charitable donation in lieu of flowers	☐ Yes — Organisation: ____________ ☐ No

5.4 Medical Wishes

Item	Person 1	Person 2

Organ donation registered	☐ Yes ☐ No ☐ Specific wishes: _______	☐ Yes ☐ No ☐ Specific wishes: _______
Preferred place of care if seriously ill	☐ Home ☐ Hospital ☐ Hospice ☐ Aged care	☐ Home ☐ Hospital ☐ Hospice ☐ Aged care
Medical treatment refusals (if any)	_________________	_________________
Advance Care Directive completed	☐ Yes ☐ No — Location: _______	☐ Yes ☐ No — Location: _______

SECTION 6 — ACTION PLAN

Complete this before filing the document away. Review annually. A partially completed dossier is infinitely more useful than a blank one.

Priority	Action	Who	By When	Done
1 — CRITICAL	Confirm Wills and EPAs are executed, witnessed, and originals stored with solicitor	________________ _	________________ _	☐
2 — CRITICAL	Confirm superannuation beneficiary nominations in place with each fund	________________ _	________________ _	☐
3 — CRITICAL	All copy holders listed on cover page have received and know where to find their copy	________________ _	________________ _	☐
4 — HIGH	Fill in Medicare numbers, Centrelink CRNs, and myGov login details	________________ _	________________ _	☐
5 — HIGH	Confirm how property title is held — joint tenants or tenants in common	________________ _	________________ _	☐
6 — HIGH	Fill in medications, GP details, and medical history for both people	________________ _	________________ _	☐
7 — HIGH	Record all vehicle registration, insurers, and policy numbers	________________ _	________________ _	☐
8 — HIGH	Document precious metals or valuables — item, weight, receipt, location	________________ _	________________ _	☐
9 — MEDIUM	Fill in all bank account details	________________ _	________________ _	☐
10 — MEDIUM	Fill in funeral notification list — with the person themselves	________________ _	________________ _	☐
11 — MEDIUM	Record service preferences (songs, readings, eulogy) with the person present	________________ _	________________ _	☐
12 — MEDIUM	List all active subscriptions for cancellation reference	________________ _	________________ _	☐
13 — MEDIUM	Store completed dossier in fireproof safe — give a copy to your solicitor	________________ _	________________ _	☐
14 — ONGOING	Review and update annually — every birthday is a good prompt	________________ _	________________ _	☐

WE'RE HERE WHEN YOU NEED US

Business Class Group · Your local Redlands property and community partner

In the weeks and months after a family emergency, property and financial decisions often can't wait. We have been a trusted part of the Redlands community for decades. We offer these services with the same care and discretion that went into this dossier.

PROPERTY SERVICES

Free Property Appraisal

Understand the value of the family home — for estate purposes, insurance, or sale planning. No obligation.

Deceased Estate Sales

Sensitive, experienced handling of property sales from deceased estates. We understand the process and the people.

Downsizing Consultation

Ready to move to something smaller, simpler, or closer to family? We help Redlands families plan and execute a downsizing transition.

Investment Property Management

If investment properties form part of the estate, we can manage them professionally while the estate is administered.

OTHER BCG SERVICES

Granny Flat / Second Dwelling

Want to stay in the family home longer by building a granny flat for yourself or a family member? Our Podular modular construction arm delivers quickly and cost-effectively.

Government Land Activation

Own rural or semi-rural land? Interested in what can be done with it? Our Queensland Land Partnership programme unlocks development potential at zero cost to landowners.

Infrastructure Funding (RAF)

Have a development site that's stalled by infrastructure costs? We help landowners access Queensland Government's $2B Residential Activation Fund.

Community Referrals

Need a solicitor, financial planner, or specialist? We maintain a trusted local network built over decades in the Redlands. Ask us.

CONTACT US

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Website

Free appraisal

🌱 THE HORAAY FOUNDATION — GIVING BACK TO COMMUNITY

Business Class Group funds the Horaay Foundation, providing full educational scholarships for underprivileged children in the Philippines. Twenty scholarships are awarded in 2026. When you choose BCG, you support a business that believes in giving back — not just locally, but internationally.

Learn more: horaay.com

This Family Emergency Dossier is a free gift from the Business Class Group to our community.
No obligation. No sales call. Just care.

If this document helped your family, please share it with someone who might need it.