# STATUTORY INSTRUMENTS

# 2007 No. 1253

# MENTAL CAPACITY, ENGLAND AND WALES

The Lasting Powers of Attorney, Enduring Powers of Attorney and Public Guardian Regulations 2007

Made - - - - 16th April 2007

Laid before Parliament 17th April 2007

Coming into force - 1st October 2007

The Lord Chancellor makes the following Regulations in exercise of the powers conferred by sections 13(6)(a), 58(3) and 64(1) of, and Schedules 1 and 4 to, the Mental Capacity Act 2005 MI.

#### **Marginal Citations**

M1 2005 c.9. Paragraph 1(3) of Schedule 1 is cited because of the meaning there given to "prescribed" and "regulations".

# PART 1

# **PRELIMINARY**

#### Citation and commencement

- 1.—(1) These Regulations may be cited as the Lasting Powers of Attorney, Enduring Powers of Attorney and Public Guardian Regulations 2007.
  - (2) These Regulations shall come into force on 1 October 2007.

# Interpretation

- **2.**—(1) In these Regulations—
  - "the Act" means the Mental Capacity Act 2005;
  - "court" means the Court of Protection;
  - "LPA certificate", in relation to an instrument made with a view to creating a lasting power of attorney, means the certificate which is required to be included in the instrument by virtue of paragraph 2(1)(e) of Schedule 1 to the Act;

"named person", in relation to an instrument made with a view to creating a lasting power of attorney, means a person who is named in the instrument as being a person to be notified of any application for the registration of the instrument;

"prescribed information", in relation to any instrument intended to create a lasting power of attorney, means the information contained in the form used for the instrument which appears under the heading "prescribed information".

#### Minimal differences from forms prescribed in these Regulations

- 3.—(1) In these Regulations, any reference to a form—
  - (a) in the case of a form set out in Schedules 1 to 7 to these Regulations, is to be regarded as including a Welsh version of that form; and
  - (b) in the case of a form set out in Schedules 2 to 7 to these Regulations, is to be regarded as also including—
    - (i) a form to the same effect but which differs in an immaterial respect in form or mode of expression;
    - (ii) a form to the same effect but with such variations as the circumstances may require or the court or the Public Guardian may approve; or
    - (iii) a Welsh version of a form within (i) or (ii).

#### **Computation of time**

- **4.**—(1) This regulation shows how to calculate any period of time which is specified in these Regulations.
  - (2) A period of time expressed as a number of days must be computed as clear days.
- (3) Where the specified period is 7 days or less, and would include a day which is not a business day, that day does not count.
- (4) When the specified period for doing any act at the office of the Public Guardian ends on a day on which the office is closed, that act will be done in time if done on the next day on which the office is open.
  - (5) In this regulation—

"business day" means a day other than—

- (a) a Saturday, Sunday, Christmas Day or Good Friday; or
- (b) a bank holiday under the Banking and Financial Dealings Act 1971 M2, in England and Wales; and

"clear days" means that in computing the number of days—

- (a) the day on which the period begins, and
- (b) if the end of the period is defined by reference to an event, the day on which that event occurs,

are not included.

#### **Marginal Citations**

**M2** 1971 c.80.

# PART 2

# LASTING POWERS OF ATTORNEY

Instruments intended to create a lasting power of attorney

# Forms for lasting powers of attorney

**5.** The forms set out in Parts 1 and 2 of Schedule 1 to these Regulations are the forms which, in the circumstances to which they apply, are to be used for instruments intended to create a lasting power of attorney.

#### Maximum number of named persons

**6.** The maximum number of named persons that the donor of a lasting power of attorney may specify in the instrument intended to create the power is 5.

# Requirement for two LPA certificates where instrument has no named persons

- 7. Where an instrument intended to create a lasting power of attorney includes a statement by the donor that there are no persons whom he wishes to be notified of any application for the registration of the instrument—
  - (a) the instrument must include two LPA certificates; and
  - (b) each certificate must be completed and signed by a different person.

#### Persons who may provide an LPA certificate

- **8.**—(1) Subject to paragraph (3), the following persons may give an LPA certificate—
  - (a) a person chosen by the donor as being someone who has known him personally for the period of at least two years which ends immediately before the date on which that person signs the LPA certificate;
  - (b) a person chosen by the donor who, on account of his professional skills and expertise, reasonably considers that he is competent to make the judgments necessary to certify the matters set out in paragraph (2)(1)(e) of Schedule 1 to the Act.
- (2) The following are examples of persons within paragraph (1)(b)—
  - (a) a registered health care professional;
  - (b) a barrister, solicitor or advocate called or admitted in any part of the United Kingdom;
  - (c) a registered social worker; or
  - (d) an independent mental capacity advocate.
- (3) A person is disqualified from giving an LPA certificate in respect of any instrument intended to create a lasting power of attorney if that person is—
  - (a) a family member of the donor;
  - (b) a donee of that power;
  - (c) a donee of—
    - (i) any other lasting power of attorney, or
    - (ii) an enduring power of attorney,

which has been executed by the donor (whether or not it has been revoked);

- (d) a family member of a donee within sub-paragraph (b);
- (e) a director or employee of a trust corporation acting as a donee within sub-paragraph (b);
- (f) a business partner or employee of—
  - (i) the donor, or
  - (ii) a donee within sub-paragraph (b);
- (g) an owner, director, manager or employee of any care home in which the donor is living when the instrument is executed; or
- (h) a family member of a person within sub-paragraph (g).
- (4) In this regulation—

"care home" has the meaning given in section 3 of the Care Standards Act 2000 M3;

"registered health care professional" means a person who is a member of a profession regulated by a body mentioned in section 25(3) of the National Health Service Reform and Health Care Professions Act 2002 M4; and

"registered social worker" means a person registered as a social worker in a register maintained by—

- (a) [F1the Health and Care Professions Council;]
- (b) the Care Council for Wales;
- (c) the Scottish Social Services Council; or
- (d) the Northern Ireland Social Care Council.

#### **Textual Amendments**

F1 Words in reg. 8(4) substituted (1.8.2012) by The Health and Social Care Act 2012 (Consequential Provision—Social Workers) Order 2012 (S.I. 2012/1479), art. 1(2), Sch. para. 81

#### **Marginal Citations**

M3 2000 c.14.

**M4** 2002 c.17.

#### **Execution of instrument**

- **9.**—(1) An instrument intended to create a lasting power of attorney must be executed in accordance with this regulation.
  - (2) The donor must read (or have read to him) all the prescribed information.
- (3) As soon as reasonably practicable after the steps required by paragraph (2) have been taken, the donor must—
  - (a) complete the provisions of Part A of the instrument that apply to him (or direct another person to do so); and
  - (b) subject to paragraph (7), sign Part A of the instrument in the presence of a witness.
  - (4) As soon as reasonably practicable after the steps required by paragraph (3) have been taken—
    - (a) the person giving an LPA certificate, or
    - (b) if regulation 7 applies (two LPA certificates required), each of the persons giving a certificate,

must complete the LPA certificate at Part B of the instrument and sign it.

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- (5) As soon as reasonably practicable after the steps required by paragraph (4) have been taken—
  - (a) the donee, or
- (b) if more than one, each of the donees,

must read (or have read to him) all the prescribed information.

- (6) As soon as reasonably practicable after the steps required by paragraph (5) have been taken, the donee or, if more than one, each of them—
  - (a) must complete the provisions of Part C of the instrument that apply to him (or direct another person to do so); and
  - (b) subject to paragraph (7), must sign Part C of the instrument in the presence of a witness.
- (7) If the instrument is to be signed by any person at the direction of the donor, or at the direction of any donee, the signature must be done in the presence of two witnesses.
  - (8) For the purposes of this regulation—
    - (a) the donor may not witness any signature required for the power;
    - (b) a donee may not witness any signature required for the power apart from that of another donee.
  - (9) A person witnessing a signature must—
    - (a) sign the instrument; and
    - (b) give his full name and address.
- (10) Any reference in this regulation to a person signing an instrument (however expressed) includes his signing it by means of a mark made on the instrument at the appropriate place.

# Registering the instrument

#### Notice to be given by a person about to apply for registration of lasting power of attorney

10. Schedule 2 to these Regulations sets out the form of notice ("LPA 001") which must be given by a donor or donee who is about to make an application for the registration of an instrument intended to create a lasting power of attorney.

# Application for registration

- 11.—(1) Schedule 3 to these Regulations sets out the form ("LPA 002") which must be used for making an application to the Public Guardian for the registration of an instrument intended to create a lasting power of attorney.
- [F2(1A)] Schedule 3A to these Regulations sets out the form ("LPA 002R") which must be used for submitting an application to the Public Guardian for the registration of an instrument intended to create a lasting power of attorney where the application is a repeat application in the circumstances set out in paragraphs (1B) and (1C) and the reduced fee for such applications applies ("a reduced fee repeat application").
- (1B) A reduced fee repeat application may only be submitted where the initial application for the registration of a lasting power of attorney is—
  - (a) made on or after 1st October 2011; and
  - (b) returned to the applicant as invalid.
- (1C) The reduced fee repeat application must be submitted for registration within three months of the date on which the initial application was subsequently returned to the applicant as invalid.]
  - (2) Where the instrument to be registered which is sent with the application is neither—

- (a) the original instrument intended to create the power, nor
- (b) a certified copy of it,

the Public Guardian must not register the instrument unless the court directs him to do so.

- (3) In paragraph (2) "a certified copy" means a photographic or other facsimile copy which is certified as an accurate copy by—
  - (a) the donor; or
  - (b) a solicitor or notary.

#### **Textual Amendments**

F2 Reg. 11(1A)-(1C) inserted (1.10.2011) by The Public Guardian (Fees, etc.) (Amendment) Regulations 2011 (S.I. 2011/2189), regs. 1, 12

# Period to elapse before registration in cases not involving objection or defect

- **12.** The period at the end of which the Public Guardian must register an instrument in accordance with paragraph 5 of Schedule 1 to the Act is the period of 6 weeks beginning with—
  - (a) the date on which the Public Guardian gave the notice or notices under paragraph 7 or 8 of Schedule 1 to the Act of receipt of an application for registration; or
  - (b) if notices were given on more than one date, the latest of those dates.

# Notice of receipt of application for registration

- 13.—(1) Part 1 of Schedule 4 to these Regulations sets out the form of notice ("LPA 003A") which the Public Guardian must give to the donee (or donees) when the Public Guardian receives an application for the registration of a lasting power of attorney.
- (2) Part 2 of Schedule 4 sets out the form of notice ("LPA 003B") which the Public Guardian must give to the donor when the Public Guardian receives such an application.
- (3) Where it appears to the Public Guardian that there is good reason to do so, the Public Guardian must also provide (or arrange for the provision of) an explanation to the donor of—
  - (a) the notice referred to in paragraph (2) and what the effect of it is; and
  - (b) why it is being brought to his attention.
  - (4) Any information provided under paragraph (3) must be provided—
    - (a) to the donor personally; and
    - (b) in a way that is appropriate to the donor's circumstances (for example using simple language, visual aids or other appropriate means).

# Objection to registration: notice to Public Guardian [F3 to be given by the donee of the power or a named person]

- **14.**—(1) This regulation deals with any objection to the registration of an instrument as a lasting power of attorney which is to be made to the Public Guardian [F4by the donee of the power or a named person].
  - (2) Where [F5 the done of the power or a named person]
    - (a) is entitled to receive notice under paragraph 6, 7 or 8 of Schedule 1 to the Act of an application for the registration of the instrument, and

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(b) wishes to object to registration on a ground set out in paragraph 13(1) of Schedule 1 to the Act,

he must do so before the end of the period of 5 weeks beginning with the date on which the notice is given.

- (3) A notice of objection must be given in writing, setting out—
  - (a) the name and address of the objector;
  - (b) F6... the name and address of the donor of the power;
  - (c) if known, the name and address of the donee (or donees); and
  - (d) the ground for making the objection.
- (4) The Public Guardian must notify the objector as to whether he is satisfied that the ground of the objection is established.
- (5) At any time after receiving the notice of objection and before giving the notice required by paragraph (4), the Public Guardian may require the objector to provide such further information, or produce such documents, as the Public Guardian reasonably considers necessary to enable him to determine whether the ground for making the objection is established.
  - (6) Where—
    - (a) the Public Guardian is satisfied that the ground of the objection is established, but
- (b) by virtue of section 13(7) of the Act, the instrument is not revoked, the notice under paragraph (4) must contain a statement to that effect.
- (7) Nothing in this regulation prevents an objector from making a further objection under paragraph 13 of Schedule 1 to the Act where—
  - (a) the notice under paragraph (4) indicates that the Public Guardian is not satisfied that the particular ground of objection to which that notice relates is established; and
  - (b) the period specified in paragraph (2) has not expired.

# **Textual Amendments**

- **F3** Words in reg. 14 title inserted (1.10.2007) by The Lasting Powers of Attorney, Enduring Powers of Attorney and Public Guardian (Amendment) Regulations 2007 (S.I. 2007/2161), regs. 1, **3(1)**
- **F4** Words in reg. 14(1) inserted (1.10.2007) by The Lasting Powers of Attorney, Enduring Powers of Attorney and Public Guardian (Amendment) Regulations 2007 (S.I. 2007/2161), regs. 1, **3(2)**
- Words in reg. 14(2) substituted (1.10.2007) by The Lasting Powers of Attorney, Enduring Powers of Attorney and Public Guardian (Amendment) Regulations 2007 (S.I. 2007/2161), regs. 1, 3(3)
- F6 Words in reg. 14(3)(b) omitted (1.10.2007) by virtue of The Lasting Powers of Attorney, Enduring Powers of Attorney and Public Guardian (Amendment) Regulations 2007 (S.I. 2007/2161), regs. 1, 3(4)

# [F7Objection to registration: notice to Public Guardian to be given by the donor

- **14A.**—(1) This regulation deals with any objection to the registration of an instrument as a lasting power of attorney which is to be made to the Public Guardian by the donor of the power.
  - (2) Where the donor of the power—
    - (a) is entitled to receive notice under paragraph 8 of Schedule 1 to the Act of an application for the registration of the instrument, and
    - (b) wishes to object to the registration,

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he must do so before the end of the period of 5 weeks beginning with the date on which the notice is given.

- (3) The donor of the power must give notice of his objection in writing to the Public Guardian, setting out—
  - (a) the name and address of the donor of the power;
  - (b) if known, the name and address of the donee (or donees); and
  - (c) the ground for making the objection.]

#### **Textual Amendments**

F7 Reg. 14A inserted (1.10.2007) by The Lasting Powers of Attorney, Enduring Powers of Attorney and Public Guardian (Amendment) Regulations 2007 (S.I. 2007/2161), regs. 1, 4

# Objection to registration: application to the court

- **15.**—(1) This regulation deals with any objection to the registration of an instrument as a lasting power of attorney which is to be made to the court.
  - (2) The grounds for making an application to the court are—
    - (a) that one or more of the requirements for the creation of a lasting power of attorney have not been met;
    - (b) that the power has been revoked, or has otherwise come to an end, on a ground other than the grounds set out in paragraph 13(1) of Schedule 1 to the Act;
    - (c) any of the grounds set out in paragraph (a) or (b) of section 22(3) of the Act.
  - (3) Where any person—
    - (a) is entitled to receive notice under paragraph 6, 7 or 8 of Schedule 1 to the Act of an application for the registration of the instrument, and
  - (b) wishes to object to registration on one or more of the grounds set out in paragraph (2),

he must make an application to the court before the end of the period of 5 weeks beginning with the date on which the notice is given.

(4) The notice of an application to the court, which a person making an objection to the court is required to give to the Public Guardian under paragraph 13(3)(b)(ii) of Schedule 1 to the Act, must be in writing.

# Notifying applicants of non-registration of lasting power of attorney

- **16.** Where the Public Guardian is prevented from registering an instrument as a lasting power of attorney by virtue of—
  - (a) paragraph 11(1) of Schedule 1 to the Act (instrument not made in accordance with Schedule),
  - (b) paragraph 12(2) of that Schedule (deputy already appointed),
  - (c) paragraph 13(2) of that Schedule (objection by donee or named person on grounds of bankruptcy, disclaimer, death etc),
  - (d) paragraph 14(2) of that Schedule (objection by donor), or
  - (e) regulation 11(2) of these Regulations (application for registration not accompanied by original instrument or certified copy),

he must notify the person (or persons) who applied for registration of that fact.

#### Notice to be given on registration of lasting power of attorney

- 17.—(1) Where the Public Guardian registers an instrument as a lasting power of attorney, he must—
  - (a) retain a copy of the instrument; and
  - (b) return to the person (or persons) who applied for registration the original instrument, or the certified copy of it, which accompanied the application for registration.
- (2) Schedule 5 to these Regulations sets out the form of notice ("LPA 004") which the Public Guardian must give to the donor and donee (or donees) when the Public Guardian registers an instrument.
- (3) Where it appears to the Public Guardian that there is good reason to do so, the Public Guardian must also provide (or arrange for the provision of) an explanation to the donor of—
  - (a) the notice referred to in paragraph (2) and what the effect of it is; and
  - (b) why it is being brought to his attention.
  - (4) Any information provided under paragraph (3) must be provided—
    - (a) to the donor personally; and
    - (b) in a way that is appropriate to the donor's circumstances (for example using simple language, visual aids or other appropriate means).
  - (5) "Certified copy" is to be construed in accordance with regulation 11(3).

# Post-registration

# Changes to instrument registered as lasting power of attorney

- **18.**—(1) This regulation applies in any case where any of paragraphs 21 to 24 of Schedule 1 to the Act requires the Public Guardian to attach a note to an instrument registered as a lasting power of attorney.
- (2) The Public Guardian must give a notice to the donor and the donee (or, if more than one, each of them) requiring him to deliver to the Public Guardian—
  - (a) the original F8... instrument which was sent to the Public Guardian for registration;
  - (b) any office copy of that registered instrument; and
  - (c) any certified copy of that registered instrument.
  - (3) On receipt of the document, the Public Guardian must—
    - (a) attach the required note; and
    - (b) return the document to the person from whom it was obtained.

# **Textual Amendments**

F8 Word in reg. 18(2)(a) omitted (1.10.2009) by virtue of The Lasting Powers of Attorney, Enduring Powers of Attorney and Public Guardian (Amendment) Regulations 2009 (S.I. 2009/1884), regs. 1(1), 3 (with reg. 6)

#### Loss or destruction of instrument registered as lasting power of attorney

19.—(1) This regulation applies where—

- (a) a person is required by or under the Act to deliver up to the Public Guardian any of the following documents—
  - (i) an instrument registered as a lasting power of attorney;
  - (ii) an office copy of that registered instrument;
  - (iii) a certified copy of that registered instrument; and
- (b) the document has been lost or destroyed.
- (2) The person required to deliver up the document must provide to the Public Guardian in writing—
  - (a) if known, the date of the loss or destruction and the circumstances in which it occurred;
  - (b) otherwise, a statement of when he last had the document in his possession.

# Disclaimer of appointment by a donee of lasting power of attorney

- **20.**—(1) Schedule 6 to these Regulations sets out the form ("LPA 005") which a donee of an instrument registered as a lasting power of attorney must use to disclaim his appointment as donee.
  - (2) The donee must send—
    - (a) the completed form to the donor; and
    - (b) a copy of it to-
      - (i) the Public Guardian; and
      - (ii) any other donee who, for the time being, is appointed under the power.

#### Revocation by donor of lasting power of attorney

- 21.—(1) A donor who revokes a lasting power to attorney must—
  - (a) notify the Public Guardian that he has done so; and
  - (b) notify the donee (or, if more than one, each of them) of the revocation.
- (2) Where the Public Guardian receives a notice under paragraph (1)(a), he must cancel the registration of the instrument creating the power if he is satisfied that the donor has taken such steps as are necessary in law to revoke it.
- (3) The Public Guardian may require the donor to provide such further information, or produce such documents, as the Public Guardian reasonably considers necessary to enable him to determine whether the steps necessary for revocation have been taken.
  - (4) Where the Public Guardian cancels the registration of the instrument he must notify—
    - (a) the donor; and
    - (b) the donee or, if more than one, each of them.

# Revocation of a lasting power of attorney on death of donor

- **22.**—(1) The Public Guardian must cancel the registration of an instrument as a lasting power of attorney if he is satisfied that the power has been revoked as a result of the donor's death.
- (2) Where the Public Guardian cancels the registration of an instrument he must notify the donee or, if more than one, each of them.

# PART 3

# **ENDURING POWERS OF ATTORNEY**

#### Notice of intention to apply for registration of enduring power of attorney

- **23.**—(1) Schedule 7 to these Regulations sets out the form of notice ("EP1PG") which an attorney (or attorneys) under an enduring power of attorney must give of his intention to make an application for the registration of the instrument creating the power.
- (2) In the case of the notice to be given to the donor, the attorney must also provide (or arrange for the provision of) an explanation to the donor of—
  - (a) the notice and what the effect of it is; and
  - (b) why it is being brought to his attention.
  - (3) The information provided under paragraph (2) must be provided—
    - (a) to the donor personally; and
    - (b) in a way that is appropriate to the donor's circumstances (for example using simple language, visual aids or other appropriate means).

# **Application for registration**

- **24.**—(1) Schedule 8 to these Regulations sets out the form ("EP2PG") which must be used for making an application to the Public Guardian for the registration of an instrument creating an enduring power of attorney.
- [<sup>F9</sup>(1A) The Public Guardian must not register an instrument where only a certified copy of the instrument is sent with the application, unless the applicant verifies that he cannot produce the original instrument because it has been lost or, as the case may be, destroyed.]
  - (2) Where the instrument to be registered which is sent with the application is neither—
    - (a) the original instrument creating the power, nor
- (b) a certified copy of it [F10 in relation to which paragraph (1A) has been complied with], the Public Guardian must not register the instrument unless the court directs him to do so.
- (3) "Certified copy", in relation to an enduring power of attorney, means a copy certified in accordance with section 3 of the Powers of Attorney Act 1971 M5.

# **Textual Amendments**

- F9 Reg. 24(1A) inserted (1.5.2010) by The Lasting Powers of Attorney, Enduring Powers of Attorney and Public Guardian (Amendment) Regulations 2010 (S.I. 2010/1063), regs. 1, 3(a) (with reg. 8)
- **F10** Words in reg. 24(2)(b) inserted (1.5.2010) by The Lasting Powers of Attorney, Enduring Powers of Attorney and Public Guardian (Amendment) Regulations 2010 (S.I. 2010/1063), regs. 1, **3(b)** (with reg. 8)

#### **Marginal Citations**

M5 1971 c.27

#### Notice of objection to registration

- **25.**—(1) This regulation deals with any objection to the registration of an instrument creating an enduring power of attorney which is to be made to the Public Guardian under paragraph 13(4) of Schedule 4 to the Act.
  - (2) A notice of objection must be given in writing, setting out—
    - (a) the name and address of the objector;
    - (b) if different, the name and address of the donor of the power;
    - (c) if known, the name and address of the attorney (or attorneys); and
    - (d) the ground for making the objection.

#### Notifying applicants of non-registration of enduring power of attorney

- **26.** Where the Public Guardian is prevented from registering an instrument creating an enduring power of attorney by virtue of—
  - (a) paragraph 13(2) of Schedule 4 to the Act (deputy already appointed),
  - (b) paragraph 13(5) of that Schedule (receipt by Public Guardian of valid notice of objection from person entitled to notice of application to register),
  - (c) paragraph 13(7) of that Schedule (Public Guardian required to undertake appropriate enquiries in certain circumstances), or
  - (d) regulation 24(2) of these Regulations (application for registration not accompanied by original instrument or certified copy),

he must notify the person (or persons) who applied for registration of that fact.

# Registration of instrument creating an enduring power of attorney

- **27.**—(1) Where the Public Guardian registers an instrument creating an enduring power of attorney, he must—
  - (a) retain a copy of the instrument; and
  - (b) return to the person (or persons) who applied for registration the original instrument, or the certified copy of it, which accompanied the application.
  - (2) "Certified copy" has the same meaning as in regulation 24(3).

# Objection or revocation not applying to all joint and several attorneys

**28.** In a case within paragraph 20(6) or (7) of Schedule 4 to the Act, the form of the entry to be made in the register in respect of an instrument creating the enduring power of attorney is a stamp bearing the following words (inserting the information indicated, as appropriate)—

"THE REGISTRATION OF THIS ENDURING POWER OF ATTORNEY IS QUALIFIED AND EXTENDS TO THE APPOINTMENT OF .........(insert name of attorney(s) not affected by ground(s) of objection or revocation) ONLY AS THE ATTORNEY(S) OF ........... (insert name of donor)".

# Loss or destruction of instrument registered as enduring power of attorney

- **29.**—(1) This regulation applies where—
  - (a) a person is required by or under the Act to deliver up to the Public Guardian any of the following documents—

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- (i) an instrument registered as an enduring power of attorney;
- (ii) an office copy of that registered instrument; or
- (iii) a certified copy of that registered instrument; and
- (b) the document has been lost or destroyed.
- (2) The person who is required to deliver up the document must provide to the Public Guardian in writing—
  - (a) if known, the date of the loss or destruction and the circumstances in which it occurred;
  - (b) otherwise, a statement of when he last had the document in his possession.

# PART 4

# FUNCTIONS OF THE PUBLIC GUARDIAN

# The registers

#### Establishing and maintaining the registers

- **30.**—(1) In this Part "the registers" means—
  - (a) the register of lasting powers of attorney,
  - (b) the register of enduring powers of attorney, and
- (c) the register of court orders appointing deputies,

which the Public Guardian must establish and maintain.

- (2) On each register the Public Guardian may include—
  - (a) such descriptions of information about a registered instrument or a registered order as the Public Guardian considers appropriate; and
  - (b) entries which relate to an instrument or order for which registration has been cancelled.

# Disclosure of information on a register: search by the Public Guardian

- **31.**—(1) Any person may, by an application made under paragraph (2), request the Public Guardian to carry out a search of one or more of the registers.
  - (2) An application must—
    - (a) state—
      - (i) the register or registers to be searched;
      - (ii) the name of the person to whom the application relates; and
      - (iii) such other details about that person as the Public Guardian may require for the purpose of carrying out the search; and
    - (b) be accompanied by any fee provided for under section 58(4)(b) of the Act.
- (3) The Public Guardian may require the applicant to provide such further information, or produce such documents, as the Public Guardian reasonably considers necessary to enable him to carry out the search.
  - (4) As soon as reasonably practicable after receiving the application—
    - (a) the Public Guardian must notify the applicant of the result of the search; and

(b) in the event that it reveals one or more entries on the register, the Public Guardian must disclose to the applicant all the information appearing on the register in respect of each entry.

# Disclosure of additional information held by the Public Guardian

- **32.**—(1) This regulation applies in any case where, as a result of a search made under regulation 31, a person has obtained information relating to a registered instrument or a registered order which confers authority to make decisions about matters concerning a person ("P").
- (2) On receipt of an application made in accordance with paragraph (4), the Public Guardian may, if he considers that there is good reason to do so, disclose to the applicant such additional information as he considers appropriate.
  - (3) "Additional information" means any information relating to P—
    - (a) which the Public Guardian has obtained in exercising the functions conferred on him under the Act; but
    - (b) which does not appear on the register.
  - (4) An application must state—
    - (a) the name of P;
    - (b) the reasons for making the application; and
    - (c) what steps, if any, the applicant has taken to obtain the information from P.
- (5) The Public Guardian may require the applicant to provide such further information, or produce such documents, as the Public Guardian reasonably considers necessary to enable him to determine the application.
- (6) In determining whether to disclose any additional information [F11relating] to P, the Public Guardian must, in particular, have regard to—
  - (a) the connection between P and the applicant;
  - (b) the reasons for requesting the information (in particular, why the information cannot or should not be obtained directly from P);
  - (c) the benefit to P, or any detriment he may suffer, if a disclosure is made; and
  - (d) any detriment that another person may suffer if a disclosure is made.

# **Textual Amendments**

**F11** Word in reg. 32(6) inserted (1.10.2009) by The Lasting Powers of Attorney, Enduring Powers of Attorney and Public Guardian (Amendment) Regulations 2009 (S.I. 2009/1884), regs. 1(1), 4 (with reg. 6)

# Security for discharge of functions

# Persons required to give security for the discharge of their functions

- **33.**—(1) This regulation applies in any case where the court orders a person ("S") to give to the Public Guardian security for the discharge of his functions.
  - (2) The security must be given by S—
    - (a) by means of a bond which is entered into in accordance with regulation 34; or
    - (b) in such other manner as the court may direct.

- (3) For the purposes of paragraph (2)(a), S complies with the requirement to give the security only if—
  - (a) the endorsement required by regulation 34(2) has been provided; and
  - (b) the person who provided it has notified the Public Guardian of that fact.
  - (4) For the purposes of paragraph (2)(b), S complies with the requirement to give the security—
    - (a) in any case where the court directs that any other endorsement must be provided, only if—
      - (i) that endorsement has been provided; and
      - (ii) the person who provided it has notified the Public Guardian of that fact;
    - (b) in any case where the court directs that any other requirements must be met in relation to the giving of the security, only if the Public Guardian is satisfied that those other requirements have been met.

# Security given under regulation 33(2)(a): requirement for endorsement

- **34.**—(1) This regulation has effect for the purposes of regulation 33(2)(a).
- (2) A bond is entered into in accordance with this regulation only if it is endorsed by—
  - (a) an authorised insurance company; or
  - (b) an authorised deposit-taker.
- (3) A person may enter into the bond under—
  - (a) arrangements made by the Public Guardian; or
  - (b) other arrangements which are made by the person entering into the bond or on his behalf.
- (4) The Public Guardian may make arrangements with any person specified in paragraph (2) with a view to facilitating the provision by them of bonds which persons required to give security to the Public Guardian may enter into.
  - (5) In this regulation—
    - "authorised insurance company" means—
    - (a) a person who has permission under Part 4 of the Financial Services and Markets Act 2000 M6 to effect or carry out contracts of insurance;
    - (b) an EEA firm of the kind mentioned in paragraph 5(d) of Schedule 3 to that Act, which has permission under paragraph 15 of that Schedule to effect or carry out contracts of insurance;
    - (c) a person who carries on insurance market activity (within the meaning given in section 316(3) of that Act); and
    - "authorised deposit-taker" means—
    - (a) a person who has permission under Part 4 of the Financial Services and Markets Act 2000 to accept deposits;
    - (b) an EEA firm of the kind mentioned in paragraph 5(d) of Schedule 3 to that Act, which has permission under paragraph 15 of that Schedule to accept deposits.
- (6) The definitions of "authorised insurance company" and "authorised deposit-taker" must be read with—
  - (a) section 22 of the Financial Services and Markets Act 2000;
  - (b) any relevant order M7 under that section; and
  - (c) Schedule 2 to that Act.

#### **Marginal Citations**

M6 2000 c.8.

M7 S.I. 2001/544, as amended by S.I. 2001/3544, 2002/682, 1310, 1776 and 1777, 2003/1475, 1476 and 2822, 2004/1610 and 2737, 2005/593, 1518 and 2967 and 2006/1969, 2383 and 3221.

# Security given under regulation 33(2)(a): maintenance or replacement

- **35.**—(1) This regulation applies to any security given under regulation 33(2)(a).
- (2) At such times or at such intervals as the Public Guardian may direct by notice in writing, any person ("S") who has given the security must satisfy the Public Guardian that any premiums payable in respect of it have been paid.
- (3) Where S proposes to replace a security already given by him, the new security is not to be regarded as having been given until the Public Guardian is satisfied that—
  - (a) the requirements set out in sub-paragraphs (a) and (b) of regulation 33(3) have been met in relation to it; and
  - (b) no payment is due from S in connection with the discharge of his functions.

# Enforcement following court order of any endorsed security

- **36.**—(1) This regulation applies to any security given to the Public Guardian in respect of which an endorsement has been provided.
  - (2) Where the court orders the enforcement of the security, the Public Guardian must—
    - (a) notify any person who endorsed the security of the contents of the order; and
    - (b) notify the court when payment has been made of the amount secured.

# Discharge of any endorsed security

- **37.**—(1) This regulation applies to any security given by a person ("S") to the Public Guardian in respect of which an endorsement has been provided.
  - (2) The security may be discharged if the court makes an order discharging it.
  - [F12(3) Otherwise the security may not be discharged—
    - (a) if the person on whose behalf S was appointed to act dies, until the end of the period of 2 years beginning on the date of his death; or
    - (b) in any other case, until the end of the period of 7 years beginning on whichever of the following dates first occurs—
      - (i) if S dies, the date of his death;
      - (ii) if the court makes an order which discharges S but which does not also discharge the security under paragraph (2), the date of the order;
      - (iii) the date when S otherwise ceases to be under a duty to discharge the functions in respect of which he was ordered to give security.]
- (4) For the purposes of paragraph (3), if a person takes any step with a view to discharging the security before the end of the period specified in that paragraph, the security is to be treated for all purposes as if it were still in place.

#### **Textual Amendments**

F12 Reg. 37(3) substituted (1.5.2010) by The Lasting Powers of Attorney, Enduring Powers of Attorney and Public Guardian (Amendment) Regulations 2010 (S.I. 2010/1063), regs. 1, 4 (with reg. 8)

#### **Deputies**

#### Application for additional time to submit a report

- **38.**—(1) This regulation applies where the court requires a deputy to submit a report to the Public Guardian and specifies a time or interval for it to be submitted.
- (2) A deputy may apply to the Public Guardian requesting more time for submitting a particular report.
  - (3) An application must—
    - (a) state the reason for requesting more time; and
    - (b) contain or be accompanied by such information as the Public Guardian may reasonably require to determine the application.
- (4) In response to an application, the Public Guardian may, if he considers it appropriate to do so, undertake that he will not take steps to secure performance of the deputy's duty to submit the report at the relevant time on the condition that the report is submitted on or before such later date as he may specify.

#### **Content of reports**

- **39.**—(1) Any report which the court requires a deputy to submit to the Public Guardian must include such material as the court may direct.
  - (2) The report must also contain or be accompanied by—
    - (a) specified information or information of a specified description; or
    - (b) specified documents or documents of a specified description.
  - (3) But paragraph (2)—
    - (a) extends only to information or documents which are reasonably required in connection with the exercise by the Public Guardian of functions conferred on him under the Act; and
    - (b) is subject to paragraph (1) and to any other directions given by the court.
- (4) Where powers as respects a person's property and affairs are conferred on a deputy under section 16 of the Act, the information specified by the Public Guardian under paragraph (2) may include accounts which—
  - (a) deal with specified matters; and
  - (b) are provided in a specified form.
  - (5) The Public Guardian may require—
    - (a) any information provided to be verified in such manner, or
- (b) any document produced to be authenticated in such manner, as he may reasonably require.
  - (6) "Specified" means specified in a notice in writing given to the deputy by the Public Guardian.

#### Power to require final report on termination of appointment

- **40.**—(1) This regulation applies where—
  - (a) the person on whose behalf a deputy was appointed to act has died;
  - (b) the deputy has died;
  - (c) the court has made an order discharging the deputy; or
  - (d) the deputy otherwise ceases to be under a duty to discharge the functions to which his appointment relates.
- (2) The Public Guardian may require the deputy (or, in the case of the deputy's death, his personal representatives) to submit a final report on the discharge of his functions.
  - (3) A final report must be submitted—
    - (a) before the end of such reasonable period as may be specified; and
    - (b) at such place as may be specified.
- (4) The Public Guardian must consider the final report, together with any other information that he may have relating to the discharge by the deputy of his functions.
- (5) Where the Public Guardian is dissatisfied with any aspect of the final report he may apply to the court for an appropriate remedy (including enforcement of security given by the deputy).
- (6) "Specified" means specified in a notice in writing given to the deputy or his personal representatives by the Public Guardian.

#### Power to require information from deputies

- **41.**—(1) This regulation applies in any case where—
  - (a) the Public Guardian has received representations (including complaints) about—
    - (i) the way in which a deputy is exercising his powers; or
    - (ii) any failure to exercise them; or
  - (b) it appears to the Public Guardian that there are other circumstances which—
    - (i) give rise to concerns about, or dissatisfaction with, the conduct of the deputy (including any failure to act); or
    - (ii) otherwise constitute good reason to seek information about the deputy's discharge of his functions.
- (2) The Public Guardian may require the deputy—
  - (a) to provide specified information or information of a specified description; or
  - (b) to produce specified documents or documents of a specified description.
- (3) The information or documents must be provided or produced—
  - (a) before the end of such reasonable period as may be specified; and
  - (b) at such place as may be specified.
- (4) The Public Guardian may require—
  - (a) any information provided to be verified in such manner, or
- (b) any document produced to be authenticated in such manner, as he may reasonably require.
  - (5) "Specified" means specified in a notice in writing given to the deputy by the Public Guardian.

#### Right of deputy to require review of decisions made by the Public Guardian

- **42.**—(1) A deputy may require the Public Guardian to reconsider any decision he has made in relation to the deputy.
- (2) The right under paragraph (1) is exercisable by giving notice of exercise of the right to the Public Guardian before the end of the period of 14 days beginning with the date on which notice of the decision is given to the deputy.
  - (3) The notice of exercise of the right must—
    - (a) state the grounds on which reconsideration is required; and
    - (b) contain or be accompanied by any relevant information or documents.
- (4) At any time after receiving the notice and before reconsidering the decision to which it relates, the Public Guardian may require the deputy to provide him with such further information, or to produce such documents, as he reasonably considers necessary to enable him to reconsider the matter.
  - (5) The Public Guardian must give to the deputy—
    - (a) written notice of his decision on reconsideration, and
    - (b) if he upholds the previous decision, a statement of his reasons.

#### Miscellaneous functions

#### **Applications to the Court of Protection**

**43.** The Public Guardian has the function of making applications to the court in connection with his functions under the Act in such circumstances as he considers it necessary or appropriate to do so.

# Visits by the Public Guardian or by Court of Protection Visitors at his direction

- **44.**—(1) This regulation applies where the Public Guardian visits, or directs a Court of Protection Visitor to visit, any person under any provision of the Act or these Regulations.
- (2) The Public Guardian must notify (or make arrangements to notify) the person to be visited of—
  - (a) the date or dates on which it is proposed that the visit will take place;
  - (b) to the extent that it is practicable to do so, any specific matters likely to be covered in the course of the visit; and
  - (c) any proposal to inform any other person that the visit is to take place.
  - (3) Where the visit is to be carried out by a Court of Protection Visitor—
    - (a) the Public Guardian may—
      - (i) give such directions to the Visitor, and
      - (ii) provide him with such information concerning the person to be visited,
      - as the Public Guardian considers necessary for the purposes of enabling the visit to take place and the Visitor to prepare any report the Public Guardian may require; and
    - (b) the Visitor must seek to carry out the visit and take all reasonable steps to obtain such other information as he considers necessary for the purpose of preparing a report.
- (4) A Court of Protection Visitor must submit any report requested by the Public Guardian in accordance with any timetable specified by the Public Guardian.

- (5) If he considers it appropriate to do so, the Public Guardian may, in relation to any person interviewed in the course of preparing a report—
  - (a) disclose the report to him; and
  - (b) invite him to comment on it.

#### Functions in relation to persons carrying out specific transactions

- **45.**—(1) This regulation applies where, in accordance with an order made under section 16(2) (a) of the Act, a person ("T") has been authorised to carry out any transaction for a person who lacks capacity.
  - (2) The Public Guardian has the functions of—
    - (a) receiving any reports from T which the court may require;
    - (b) dealing with representations (including complaints) about—
      - (i) the way in which the transaction has been or is being carried out; or
      - (ii) any failure to carry it out.
  - (3) Regulations 38 to 41 have effect in relation to T as they have effect in relation a deputy.

#### Power to require information from donees of lasting power of attorney

- **46.**—(1) This regulation applies where it appears to the Public Guardian that there are circumstances suggesting that the done of a lasting power of attorney may—
  - (a) have behaved, or may be behaving, in a way that contravenes his authority or is not in the best interests of the donor of the power,
  - (b) be proposing to behave in a way that would contravene that authority or would not be in the donor's best interests, or
  - (c) have failed to comply with the requirements of an order made, or directions given, by the court.
  - (2) The Public Guardian may require the donee—
    - (a) to provide specified information or information of a specified description; or
    - (b) to produce specified documents or documents of a specified description.
  - (3) The information or documents must be provided or produced—
    - (a) before the end of such reasonable period as may be specified; and
    - (b) at such place as may be specified.
  - (4) The Public Guardian may require—
    - (a) any information provided to be verified in such manner, or
- (b) any document produced to be authenticated in such manner, as he may reasonably require.
  - (5) "Specified" means specified in a notice in writing given to the donee by the Public Guardian.

#### Power to require information from attorneys under enduring power of attorney

- **47.**—(1) This regulation applies where it appears to the Public Guardian that there are circumstances suggesting that, having regard to all the circumstances (and in particular the attorney's relationship to or connection with the donor) the attorney under a registered enduring power of attorney may be unsuitable to be the donor's attorney.
  - (2) The Public Guardian may require the attorney—

Changes to legislation: There are currently no known outstanding effects for the The Lasting Powers of Attorney, Enduring Powers of Attorney and Public Guardian Regulations 2007. (See end of Document for details)

- (a) to provide specified information or information of a specified description; or
- (b) to produce specified documents or documents of a specified description.
- (3) The information or documents must be provided or produced—
  - (a) before the end of such reasonable period as may be specified; and
  - (b) at such place as may be specified.
- (4) The Public Guardian may require—
  - (a) any information provided to be verified in such manner, or
- (b) any document produced to be authenticated in such manner, as he may reasonably require.
  - (5) "Specified" means specified in a notice in writing given to the attorney by the Public Guardian.

# Other functions in relation to enduring powers of attorney

- **48.**—[F13(1)] The Public Guardian has the following functions—
  - (a) directing a Court of Protection Visitor—
    - (i) to visit an attorney under a registered enduring power of attorney, or
    - (ii) to visit the donor of a registered enduring power of attorney, and to make a report to the Public Guardian on such matters as he may direct;
  - (b) dealing with representations (including complaints) about the way in which an attorney under a registered enduring power of attorney is exercising his powers.
- [F14(2)] The functions conferred by paragraph (1) may be discharged in co-operation with any other person who has functions in relation to the care or treatment of P.]

#### **Textual Amendments**

- F13 Reg. 48 renumbered as reg. 48(1) (1.5.2010) by The Lasting Powers of Attorney, Enduring Powers of Attorney and Public Guardian (Amendment) Regulations 2010 (S.I. 2010/1063), regs. 1, 5(a) (with reg. 8)
- F14 Reg. 48(2) inserted (1.5.2010) by The Lasting Powers of Attorney, Enduring Powers of Attorney and Public Guardian (Amendment) Regulations 2010 (S.I. 2010/1063), regs. 1, 5(b) (with reg. 8)

Signed by authority of the Lord Chancellor.

Department for Constitutional Affairs

Cathy Ashton,
Parliamentary Under-Secretary of State,

Changes to legislation: There are currently no known outstanding effects for the The Lasting Powers of Attorney, Enduring Powers of Attorney and Public Guardian Regulations 2007. (See end of Document for details)

# [F15SCHEDULE 1

Regulation 5

# Form for Instrument Intended to Create a Lasting Power of Attorney

# **Textual Amendments**

F15 Sch. 1 substituted (1.10.2009) by The Lasting Powers of Attorney, Enduring Powers of Attorney and Public Guardian (Amendment) Regulations 2009 (S.I. 2009/1884), reg. 1(1), Sch. (with reg. 6)

Part 1: Form for Instrument Intended to Create a Property and Financial Affairs Lasting Power of Attorney

	or OPG office use only	SEEDING CONFIDENCE CONTRACTOR
	PA PA	
-	egistered on	Office of the
1 -	PG reference umber	Public Guardian
		Public dual diali
		Checklist
	asting power of attorney –	See the information sheet for guidance on all the people involved
_	roperty and financial affairs	Part A: about you, the attorneys you are appointing, and people to be told
Thi bel	s lasting power of attorney allows you to choose people to act on your nalf (as an attorney) and make decisions about your <b>property and</b> ancial affairs, when you are unable to make decisions for yourself.	How many attorneys are you appointing? Write in words.
lf y you	ou also want someone to make decisions about your health and welfare, will need a separate form (downloadable from our website or call	
	00 456 0300).	How many replacement attorneys are you appointing? Write in words or write 'None' if this does not apply.
	one aged 18 or over, who has the mental capacity to do so.	
	fore you fill in the lasting power of attorney:  Please read the guidance available at publicguardian.gov.uk or by calling 0300 456 0300. See, for example, the Lasting power of attorney creation pack or other relevant guidance booklets which are all available online or by post.	How many people to be told are you choosing? Write in words from Wone to tive. If Wone you must have two certificate providers in part B.
	Make sure you understand the purpose of this lasting power of attorney and the extent of the authority you are giving your attorneys.	Part B: about your certificate providers
3.	Read the separate Information sheet to understand all the people involved, and how the three parts of the form should be filled in.	
4.	Make sure you, your certificate provider(s), and your attorney(s) have read the section on page 2 called <b>Information you must read</b> before filling in their relevant part.	How many certificate providers do you have? (Tick one box)  One OR Two
		If you have used any continuation sheets each one must be signed and dated.
(	This lasting power of attorney could be rejected at registration if it contains any errors.	(Write the number of each) continuation sheet A1
		continuation sheet A2
		continuation sheet A3:PFA
		continuation sheet B
		continuation sheet C
	A PA 10 09 © Crown copyright 2009	Total number of continuation sheets

#### Page 2 of 11

Lasting power of attorney for property and financial affairs

# Information you must read



This lasting power of attorney is a legal document. Each person who signs parts A, B and C must read this information before signing.

# Purpose of this lasting power of attorney

This lasting power of attorney gives your attorneys authority to make decisions about your property and financial affairs when you cannot make your own decisions. This can include running your bank accounts and savings accounts, decisions about making or selling investments and selling property, and spending your money.

#### When your attorneys can act for you

Your attorneys can use this lasting power of attorney only after it has been registered and stamped on every page by the Office of the Public Guardian. Your attorneys can make decisions for you as soon as this lasting power of attorney is registered – both when you have mental capacity and when you lack mental capacity, unless you put a restriction in this lasting power of attorney.

#### The Mental Capacity Act

Your attorneys cannot do whatever they like. They must follow the principles of the Mental Capacity Act 2005.

Guidance about these principles is in the Mental Capacity Act Code of Practice. Your attorneys must have regard to the Code of Practice. They can get a copy from The Stationery Office at tso. co.uk or read it online at publicguardian.gov.uk

#### Principles of the Act that your attorneys must follow

- 1 Your attorneys must assume that you can make your own decisions unless they establish that you cannot do so.
- 2 Your attorneys must help you to make as many of your own decisions as you can. They cannot treat you as unable to make the decision in question unless all practicable steps to help you to do so have been made without success.
- 3 Your attorneys must not treat you as unable to make the decision in question simply because you make an unwise decision.
- 4 Your attorneys must make decisions and act in your best interests when you are unable to make the decision in question.
- 5 Before your attorneys make the decision in question or act for you, they must consider whether they can make the decision or act in a way that is less restrictive of your rights and freedom but still achieves the purpose.

#### Your best interests

Your attorneys must act in your best interests in making decisions for you when you are unable to make the decision yourself. They must take into account all the relevant circumstances. This includes, if appropriate, consulting you and others who are interested in your welfare. Any guidance you add may assist your attorneys in identifying your views.

#### Cancelling this lasting power of attorney

You can cancel this lasting power of attorney at any time before or after it is registered as long as you have mental capacity to cancel it. Please read the guidance available at publicguardian.gov.uk

#### How to fill in this form

· Tick the boxes that apply like this



- · Use black or blue ink and write clearly
- Cross through any boxes or sections that don't apply to you, like this:

Any other names you are known by in financial documents or accounts

 Don't use correction fluid – please cross out any mistakes and rewrite nearby. All corrections must be initialled by the person completing that section of the form (and their witness) like this:

Any other names you are known by in financial

WILLIAM EDWARD SMITH
A.S.B / W.E.S. SMYTH

 Your application could be rejected if your intentions are not clear and explicit. If you are in any doubt, please start again on a new copy of the form.

#### What happens after you've filled it in?

The next step is to register it. You or your attorneys can do this at any time. The person applying will need to fill in a registration form and may need to pay a fee at that time. They will also need to send notices to the 'people to be told' named at part A when the application to register this lasting power of attorney is made. You can find out more and download the registration form at publicguardian.gov.uk

The 'people to be told' are given time to raise any concerns or objections. This means the earliest the Office of Public Guardian can register this lasting power of attorney is 6 weeks after they notify the donor or attorneys that an application to register has been received.

Your lasting power of attorney will **end** if it can no longer be used. For example, if a sole attorney dies or can no longer act for you and no replacement attorney has been named in this lasting power of attorney. Please read the guidance available at **publicguardian.gov.uk** 



Valid only with Office of the Public Guardian stamp

Part A Declaration by the person	on who is giving this lasting power of attorn
Yease write clearly using black or blue ink.	
1 About the person who is giving this lasting pov	ver of attorney
Mr Mrs Ms Miss Other title First names	Address and postcode
Last name	Postcode
Date of birth	Any other names you are known by in financial documents or accounts
2 About the attorneys you are appointing	
for property and financial affairs. Your attorney must not be bankrupt. Your first or only attorney	Your second attorney Please cross through this section if it does not apply.
Your first or only attorney  Mr Mrs Ms Miss Other title	
First names of your first or only attorney	First names of your second attorney
Last name of your first or only attorney	Last name of your second attorney
	Date of birth of your second attorney
Date of birth of your first or only attorney	Date of birth of your second attorney
Date of birth of your first or only attorney	Date of birth of your second attorney
Address and postcode of your first or only attorney	Date of birth of your second attorney  DDMMYYYYY  Address and postcode of your second attorney  Postcode  Other attorneys you are appointing  Number of attorneys named in continuation sheet A1 attached to this lasting power of attorney
Date of birth of your first or only attorney  D'D'M'M'Y'Y'Y'  Address and postcode of your first or only attorney  Postcode  If you are appointing more than two attorneys, use continuation sheet A1 to tell us about your	Date of birth of your second attorney  D'D'M'M'Y'Y'Y'  Address and postcode of your second attorney  Postcode  Other attorneys you are appointing

<ul> <li>A trust corporation cannot be going through winding-up</li> </ul>	ease cross through this section if it does not apply.  p proceedings.
Company name	Address
Are you appointing this trust corporation to act as an	
attorney, or	
replacement attorney?	Postcode
3 About appointing replacements if an attorney	can no longer act
ff you are appointing a trust corporation as repla Your trust corporation should then fill in continua	
Thinking about replacement attorneys - Replacement attorneys will only act once your attorney	can no longer act for you.
	who does not want to act for you or who is permanently no
longer able to act because they are dead, bankrupt, ha to you or were your civil partner, and have now had the	ave disclaimed, lack mental capacity or if they were married
You do not have to appoint any replacements.	interrupe or days partitionally annualled or disastron.
<ul> <li>If you appoint only one attorney and no replacements, can no longer act.</li> </ul>	this lasting power of attorney will end when your attorney
Your first or only replacement attorney Please cros	ss through this section if it does not apply.
Mr Mrs Ms Miss Other title	Date of birth of your first or only replacement
	D'D'M'M'Y'Y'Y
First names of your first or only replacement	Address and postcode of your first or only replacemen
Last name of your first or only replacement	
cast name of your mot of only representent	188
	Postcode
	Postcode
f you are appointing more than one	Other replacement attorneys you are appointing
replacement, use continuation sheet A1 to tell us about your other replacement attorneys.	Number of replacement attorneys named in continuation sheet A1 attached to this lasting
	power of attorney
	Cross through this box if this does not apply

Thinking about how you want your attorneys to make decisions	
to make decisions	Choosing which decisions must be made together and which decisions may be made
If you leave this section blank, your attorneys will be appointed to make all decisions jointly.	separately – how this will work in practice  • Please make your intentions clear about how your
Jointly: this means that the attorneys must make all decisions together. → For further information on appointing your attorneys jointly, see the separate guidance.	attorneys are to make decisions about running bank accounts and savings accounts, making or selling investments and selling property, and spending your money.
Jointly and severally: this means that attorneys can make decisions together and separately. This might be useful, for example, if one attorney is not available to make a decision at a certain time. If one attorney cannot act the remaining attorney is able to continue to make decisions.	<ul> <li>Please check that your intentions will work in practice – it may not be possible to register or use this lasting power of attorney if, for example, a bank or building society account cannot be operated as you wish.</li> </ul>
<ul> <li>Jointly for some decisions, and jointly and severally for other decisions: this means that your attorneys must make certain decisions together and may make certain decisions separately. You will need to set out below how you want this to work in practice.</li> </ul>	
How you want your attorneys to make decisions	
f you are appointing only one attorney and no replacem	nent attorneys, now go to section 5 →
Jointly	→ Go to section 5 and cross through the box below
Jointly and severally	→ Go to section 5 and cross through the box below
attorneys must make jointly and which decisions n	nay be made jointly and severally

age 6 of 11	Lasting power of attorney for property and financial affe
5 About restrictions and conditions	
Putting restrictions and conditions into words	Restrictions and conditions about property and financial affair
<ul> <li>You should read the separate guidance for examples of conditions and restrictions that will not work in practice.</li> </ul>	
<ul> <li>Your attorneys must follow any restrictions or conditions you put in place. But it may not be possible to register or use this lasting power of attorney if a condition is not workable.</li> </ul>	
<ul> <li>Either: give any restrictions and conditions about property and financial affairs here</li> </ul>	
<ul> <li>Or: if you would like your attorneys to make decisions with no restrictions or conditions, you should cross through this box.</li> </ul>	ff you need more space, use continuation sheet A2
6 About guidance to your attorneys	
Putting guidance into words  Any guidance you add may help your attorneys to identify your views. You do not have to add any.  Your attorneys do not have to follow your guidance but it will help them to understand your wishes when they make decisions for you.  Either: Give any guidance about property and financial affairs here  Or: if you have no guidance to add, please cross through this box.	Guidance to your attorneys about property and financial affair
7 About paying your attorneys	
Professional charges	Charges for services
Professional attorneys, such as solicitors and accountants, charge for their services. You can also choose to pay a non-professional person for their services. You should discuss payment with your attorneys and record any agreement made here to avoid any confusion later.  You can choose to pay non-professional attorneys for their services, but if you do not record any agreement here they will only be able to recover reasonable out-of-pocket expenses	If you need more space, use continuation sheet A2
	→ For further information on paying attorneys, please see the separate guidance.
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<ul> <li>About people to be told when the application</li> </ul>	to register this lasting power of attorney is made
Thinking about people to be told	
For your protection you can choose up to five people	e to be told when your lasting power of attorney is being
	opportunity to raise any concerns or objections before this
lasting power of attorney is registered and can be use	
<ul> <li>You do not have to choose anyone. But if yo to sign the certificate to confirm understand</li> </ul>	ou leave this section blank, you must choose two people
	acement named at part A or in continuation sheets to part A.
The people to be told carriot be your attorney or repr	acement hamed at part A or in continuation sheets to part A.
The first or only person to be told	The second person to be told
Please cross through this section if it does not apply.	Please cross through this section if it does not apply.
Mr Mrs Ms Miss Other title	Mr Mrs Ms Miss Other title
First names of first or only person to be told	First names of second person to be told
Last name of first or only person to be told	Last name of second person to be told
and the state of strip person to be total	The state of the s
	-11-
Address and postcode of first or only person	Address and postcode of second person
o be told	to be told
Postcode	Postcode
Posicode	Posicode
Please cross through this section if it does not apply  Tell us about other people to be told on continu  Number of other people to be told named in continus sheet A1 attached to this lasting power of attorney	
Helpline Valid only with	Office of the Public Guardian stamp

Before signing please check that you have:	People to be told when the application to register
filled in every answer that applies to you	this lasting power of attorney is made
crossed through blank boxes that do not apply to you     filled in any continuation sheets     crossed through any mistakes you have made     initialled any changes you have made.	I have chosen the people to be told, and have chosen one person to sign the certificate of understanding at part B.
No changes may be made to this lasting power of	OR
attorney and no continuation sheets may be added after part A has been filled in and signed. If any change	I do not want anyone to be told, and have chosen <b>two</b> people to sign certificates of understanding at part B.
appears to have been made, this lasting power of attorney will not be valid and will be rejected when an application is made to register it.	If you cannot sign this lasting power of attorney you can make a mark instead.
By signing (or marking) on this page, or by directing someone to sign continuation sheet	If you cannot sign or make a mark use continuation sheet A3:PFA →
A3:PFA, I confirm all of the following:	Signed (or marked) by the person giving this lasting power of attorney and delivered as a deed
Statement of understanding	Sign with usual signature
have read or had read to me: the section called 'Information you must read'	
on page 2	
all information contained in part A and any continuation sheets to part A of this lasting power of attorney.	Date signed or marked
appoint and give my attorneys authority to make	D'D'M'M'Y'Y'Y
appoint and give my attorneys authority to make lecisions about my property and financial affairs, nocluding when I cannot act for myself because I lack nental capacity, subject to the terms of this lasting loower of attorney and to the provisions of the Mental Capacity Act 2005.	Sign (or mark) and date each continuation sheet at the same time as you sign (or mark) part A. You must sign (or mark) and date part A here before parts B and C are signed and dated.
The witness should be independent of you and:	Witnessed by
Must be 18 or over.	Signature of witness
Cannot be an attorney or replacement attorney named at part A or any continuation sheets to this lasting power of attorney or the employee of any trust corporation named as an attorney or replacement attorney.	
Can be a certificate provider at part B.	Full names of witness
Can be a person to be told when the application to	
register this lasting power of attorney is made.  Must initial any changes made in Part A.	Address and postcode of witness
	Postcode
Helpline J 0300 456 0300 Valid only with Office	of the Public Guardian stamp

Changes to legislation: There are currently no known outstanding effects for the The Lasting Powers of Attorney, Enduring Powers of Attorney and Public Guardian Regulations 2007. (See end of Document for details)

	your first or only certificate ficate to confirm understanding
Your certificate provider fills in, signs and dates th	
Declaration by the person who is signing	
Please refer to separate guidance for certifical if the guidance is not followed, this lasting pow attorney may not be valid and could be rejecte when an application is made to register it.  In part A (section 8) has the person giving this power of attorney chosen at least one person when the application to register this lasting power of attorney is made?  If yes = one certificate provider fills in this part if no = the first certificate provider fills in this and the second certificate provider min continuation sheet B.  The donor is the person who is giving this last power of attorney.  By signing below, I confirm:  My understanding of the role and responsibilities as a provider.  I have read part A of this lasting power of attorned including any continuation sheets.  I have read the section called 'Information your read' on page 2 of this lasting power of attorned in understand my role and responsibilities as a provider.  Statement of acting independently  I confirm that I act independently of the attorned the donor and I am aged 18 or over.  I am not:  • an attorney or replacement attorney named lasting power of attorney or any other lasting attorney or enduring power of attorney for the attorney or enduring power of attorney for the attorneys or replacements  • a business partner or paid employee of the any of their attorneys or replacements  • the owner, director, manager or employee of home that the donor lives in, or a member of family  • a director or employee of a trust corporation as an attorney or replacement attorney in the power of attorney.	Before signing this certificate you must establish that the donor understands what it is, the authority they are giving their attorneys, and is not being pressurised into making it.  If someone challenges this lasting power of attorneyou may need to explain how you formed your opinion.  Statement of personal knowledge or relevant professional skills  Please cross through the box that does not apply.  EITHER  I have known the donor for at least two years and as more than an acquaintance. My personal knowledge of the donor is:  Betore signing this certificate you must establish that the authority they are giving the authority they are giving the authority they are giving their attorneys, and is not being pressured into making it.  If someone challenges this lasting power of attorney you may need to explain how you formed your opinion.  Statement of personal knowledge or relevant professional skills.  Please cross through the box that does not apply.  EITHER  I have known the donor for at least two years and as more than an acquaintance. My personal knowledge of the donor is:  OR  I have relevant professional skills. (Please state your profession – for example, a GP or solicitor – and then the particular skills that are relevant to you forming your opinion – for example, a consultant specialising in geriatric care.)  My profession and particular skills are:  My profession and particular skills are:

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	certificate (continued)
Things you certify	Name and address of the person who is signing
I certify that, in my opinion, at the time of signing part A:	this certificate
the donor understands the purpose of this lasting	Mr Mrs Ms Miss Other title
power of attorney and the scope of the authority conferred under it	
no fraud or undue pressure is being used to induce the donor to create this lasting power of attorney	First names of certificate provider
<ul> <li>there is nothing else which would prevent this lasting power of attorney from being created by the completion of this form.</li> </ul>	Last name of certificate provider
Your signature	Address and postcode of certificate provider
Do not sign until part A of this lasting power of attorney has been filled in and signed.  Sign as soon as possible after part A is signed. If this part is signed before part A is signed, this lasting power of attorney will not be valid and will be rejected when an	
application is made to register it.	Postcode

	Lasting power of attorney for property and financial affairs
	orney or replacement attorney attorney(s) sign and date this part.
If you are appointing more than one attorney, including this sheet before it is filled in so that each attorney have	
Statement by the attorney or replacement attorney w	ho is signing this declaration
<ul> <li>The attorney or replacement attorney must not be banker.</li> <li>Before a replacement can act for you, they must get in to original lasting power of attorney form. They will get guid</li> </ul>	ouch with the Office of the Public Guardian and return the
By signing below, I confirm all of the following:	
Understanding of role and responsibilities have read the section called 'Information you must read' on page 2 of this lasting power of attorney. understand my role and responsibilities under this	For this lasting power of attorney to be valid and registered this part should not be signed before Part A or part B have been completed, signed and dated. Sign part C as soon as possible after part B is signed.
lasting power of attorney, in particular:  I have a duty to act based on the principles of the Mental Capacity Act 2005 and have regard to the Mental Capacity Act Code of Practice	Signed or marked by the attorney or replacement attorney as a deed and delivered (or if to be signed at their direction refer to separate guidance)
I can make decisions and act only when this lasting power of attorney has been registered     I must make decisions and act in the best interests of	3
the person who is giving this lasting power of attorney  I can spend money to make gifts but only to charities or on customary occasions and for reasonable amounts	Full name of [attorney] or [replacement attorney] delete as appropriate
<ul> <li>I have a duty to keep accounts and financial records and produce them to the Office of the Public Guardian and/or to the Court of Protection on request.</li> </ul>	Date signed or marked
Further statement of replacement attorney	
replace the original attorney if I am still eligible to act as an attorney.  I have the authority to act under this lasting power of attorney only after an original attorney's appointment is terminated and I have notified the Public Guardian of the event.	
The witness must be over 18 and can be:	Signature of witness
<ul> <li>another attorney or replacement attorney named at part A or in continuation sheet A to this lasting power of attorney</li> </ul>	
<ul> <li>a certificate provider at part B of this lasting power of attorney.</li> </ul>	Full name of witness
a person to be told when the application to register this lasting power of attorney is made.	
The donor cannot be a witness. The witness must see the attorney or replacement attorney sign or make a mark.	Address and postcode of witness
	Postcode
Helpline Valid only with Office	ce of the Public Guardian stamp

	people	
Use this continuation sheet for details of all additional at Make copies of this sheet before filling it in if you need r	, ,	neys, or people to be told.
About the additional people	nore than one sheet.	
For each additional person, provide the	For example:	OV:
following details	Third attorney	Second replacement
Whether you want them to act as an attorney, replacement attorney or person to be told	Mr John Smith,     38 London Street,     Posttown, PC6 9ZZ     19 January 1960     To January 1960     Attorney     Mrs Susan Jones     27 Lincoln Road,     Posttown, PC7 9X     12 December 196	
If you don't make your requirements for each person clear this lasting power of attorney could be rejected at registration		27 Lincoln Road, Posttown, PC7 9XX
Their title, full name, address (including postcode)     Their date of birth		* 12 December 1962
About you		
Name of person who is giving this lasting power		or signed by the direction
About you  Name of person who is giving this lasting power of attorney  Date signed or marked  D'D'M'M'Y'Y'Y'		

Continuation sheet A2 – how your a	
AZ severally, restrictions & conditions,	nttorneys make decisions jointly and guidance, payment
Only use this continuation sheet to provide further additional Make copies of this sheet before filling it in if you need it	onal information about how you want your attorneys to ac nore than one sheet.
About the additional information	
For each additional piece of information you are pro  Which decisions your attorneys should make jointly and decisions they should make jointly and severally (only if the Restrictions and conditions) Guidance to your attorneys	which
Paying your attorneys	
About you	
About you  Name of person who is giving this lasting power of attorney	Signed or marked by (or signed by the direction of) the person giving this lasting power of attorney
Name of person who is giving this lasting power of attorney  Date signed or marked	
Name of person who is giving this lasting power of attorney	
Name of person who is giving this lasting power of attorney  Date signed or marked  D D M M Y Y Y Y  Please attach this sheet to the back of your lasting power of attorney before you sign and date the	of) the person giving this lasting power of attorned
Name of person who is giving this lasting power of attorney  Date signed or marked  D'D'M'M'Y'Y'Y  Please attach this sheet to the back of your lasting	of) the person giving this lasting power of attorne
Name of person who is giving this lasting power of attorney  Date signed or marked  D D M M Y Y Y Y  Please attach this sheet to the back of your lasting power of attorney before you sign and date the declaration in part A.  And number your continuation sheets consecutively.	of) the person giving this lasting power of attorned

A3:PFA Continuation sheet A3	(property and financial affairs) – nake a mark
Use this continuation sheet if you cannot sign at part A	of your lasting power of attorney.
Signature of someone signing on behalf of the pers	on giving this lasting power of attorney
The person signing on behalf of the person giving this lasting power of attorney must  sign in the person's presence and in the presence of two witnesses.  sign in their own name  not also be a witness.	Signed as a deed and delivered in the presence of and at the direction of the person giving this lasting power of attorney and in the presence of two witnesses
Full name of the person signing	
Sign and date each continuation sheet at the same time as you sign part A here You must sign and date part A here before parts B and C are signed and dated.	Date signed D'D'M'M'Y'Y'Y'Y
Each witness  Must be 18 or over  Cannot be an attorney or replacement attorney named at part A or any continuation sheet A to this lasting power of attorney	Can be a certificate provider at part B  Can be a person to be told when the application to register this lasting power of attorney is made  Must initial any changes made in Part A
Witnessed by Signature of first witness	Also witnessed by Signature of second witness
Date signed D'D'M'M'Y'Y'Y' Full names of first witness	Date signed D'D'M'M'Y'Y'Y  Full names of second witness
Address and postcode of first witness	Address and postcode of second witness
Postcode	Postcode
About you	
Name of person who is giving this lasting power of attor	mey
Please attach to the back of your lasting power of attorney after this sheet has been signed and dated.  And number your continuation sheets consecutively.	This is continuation sheet number  Total number of continuation sheets

Continuation about B alcaloustics b	
certificate to confirm understanding	y your second certificate provider:
Your second certificate provider signs and dates this con	tinuation sheet
Declaration by the person who is signing this certif	icate
Please refer to separate guidance for certificate providers.	How you formed your opinion
If the guidance is not followed, this lasting power of attorney may not be valid and could be rejected when an application is made to register it.	Before signing this certificate you must establish that the donor understands what it is, the authority they are giving their attorneys, and is not being pressurised into
In part A (property and financial affairs section 8, or health and welfare section 9) has the person giving this lasting power of attorney chosen at least one person to be told when the application to register this lasting power of	making it.  If someone challenges this lasting power of attorney you may need to explain how you formed your opinion.
attorney is made?  If yes = you only need one certificate provider so you do not need to fill in this continuation sheet	Statement of personal knowledge or relevant professional skills
If no = the second certificate provider must fill in this	Please cross through the box that does not apply.
continuation sheet	EITHER
The donor is the person who is giving this lasting power of attorney.	I have known the donor for at least two years and as more than an acquaintance. My personal knowledge of the donor is:
By signing below, I confirm:	
My understanding of the role and responsibilities	
I have read part A of this lasting power of attorney, including any continuation sheets.	
I have read the section called 'Information you must read' on page 2 of this lasting power of attorney.	
I understand my role and responsibilities as a certificate provider.	
Statement of acting independently	
confirm that I act independently of the attorneys and of the donor and I am aged 18 or over.	OR
I am not:	I have relevant professional skills. (Please state
<ul> <li>an attorney or replacement attorney named in this lasting power of attorney or any other lasting power of attorney or enduring power of attorney for the donor</li> </ul>	your profession – for example, a GP or solicitor – and then the particular skills that are relevant to you forming your opinion – for example, a
a family member related to the donor or any of their	consultant specialising in geriatric care'.)
attorneys or replacements	My profession and particular skills are:
<ul> <li>a business partner or paid employee of the donor or any of their attorneys or replacements</li> </ul>	
the owner, director, manager or employee of a care home that the donor lives in, or a member of their family	
<ul> <li>a director or employee of a trust corporation appointed as an attorney or replacement attorney in this lasting</li> </ul>	
power of attorney (for property and financial affairs only).	
Number each page individually and attach both continuation sheet B pages to the back of your lasting	This is continuation sheet number
power of attorney after you sign and date the declaration in part A.	Total number of continuation sheets  Continues over

Continuation sheet B (continued) - de provider; certificate to confirm under	
Declaration by the person who is signing this certification	
Things you certify	Name and address of the person who is signing this certificate
I certify that, in my opinion, at the time of signing part A:	Mr Mrs Ms Miss Other title
<ul> <li>the donor understands the purpose of this lasting power of attorney and the scope of the authority conferred under it</li> </ul>	mr mrs ms miss Other title
no fraud or undue pressure is being used to induce the donor to create this lasting power of attorney	First names of certificate provider
there is nothing else which would prevent this lasting power of attorney from being created by the completion of this form.  Your signature	Last name of certificate provider
	Address and postcode of certificate provider
Do not sign until part A of this lasting power of attorney has been filled in and signed.  Sign as soon as possible after part A is signed. If this part is signed before part A is signed, this lasting power of attorney will not be valid and will be rejected when an application is made to register it.	Postcode
Signature of certificate provider	Posicode
Number each page individually and attach both pages of continuation sheet B to the back of your lasting power of attorney after you sign and date the declaration in part A.	This is continuation sheet number  Total number of continuation sheets

Use this continuation sheet if you are appointing a trust of	corporation as attorney or replacement attorney.
A trust corporation cannot be going through winding-up p	proceedings.
Statement by the trust corporation acting as attorne of the trust corporation sign and date this statement	y or replacement attorney – person(s) signing on beha
By execution of this deed the trust corporation confirms all of the following:  Understanding of role and responsibilities It has read the section called 'Information you must read' on page 2 of this lasting power of attorney. It understands its role and responsibilities under this lasting power of attorney, in particular it:  • has a duty to act based on the legal principles of the Mental Capacity Act 2005 and have regard to the Mental Capacity Act Code of Practice  • can make decisions and act only when this lasting power of attorney has been registered  • must make decisions and act in the best interests of the person who is giving this lasting power of attorney  • can spend money to make gifts but only to charities or on customary occasions and for reasonable amounts  • has a duty to keep accounts and financial records and produce them to the Office of the Public Guardian or the Court of Protection on request.  Tick the option which applies:  Either:  Seal of trust corporation stamped below	For this lasting power of attorney to be valid and registered this part should not be signed before Part A or part B have been completed, signed and dated. Sign part C as soon as possible after part B is signed.  I/We are authorised to sign on behalf of the trust corporation acting as attorney whose details are given in this continuation sheet to this lasting power of attorney.  Signed as a deed and delivered by Signature of first authorised person  Full name of first person signing  Date signed  D D M M Y Y Y Y  Signature of second authorised person (cross through if only one authorised person is required)
Or:  At least one authorised person has signed and dated in the right-hand column  Please attach this sheet to the back of your lasting power of attorney after parts A and B are signed.  And number your continuation sheets consecutively.	Full name of second person signing  Date signed D'D'M'M'Y'Y'Y  Company registration number  This is continuation sheet number  Total number of continuation sheets

Part 2: Form for Instrument Intended to Create a Health and Welfare Lasting Power of Attorney]

F	or OPG office use only	
	PA HW	
Н	egistered on DPG reference	Office of the
	umber	Public Guardian
		r abile Gaaraian
		Checklist
	asting power of attorney	See the information sheet for guidance on all the people involved
ĺ	or health and welfare	Part A: about you, the attorneys
٨b	out this lasting power of attorney	you are appointing, and people to be told
'n	is lasting power of attorney allows you to choose people to act on your	
	half (as an attorney) and make decisions about your health and personal Ifare, when you are unable to make decisions for yourself. This can	How many attorneys are you appointing? Write in words.
	lude decisions about your healthcare and medical treatment, decisions out where you live and day-to-day decisions about your personal welfare,	
	th as your diet, dress or daily routine.	How many malacement atterneys
If you also want someone to make decisions about your <b>property and</b> financial affairs, you will need a separate form (downloadable from our website or call 0300 456 0300).		How many replacement attorneys are you appointing? Write in words or write 'None' if this does not apply.
	no can fill it in?  yone aged 18 or over, who has the mental capacity to do so.	How many people to be told are
	yene against the oral, three has the manual dapated, to a con-	you choosing? Write In words from Wone' to 'five', If 'Wone' you must have
	fore you fill in the lasting power of attorney:	two certificate providers in part B.
-	Please read the guidance available at publicguardian.gov.uk or by calling 0300 456 0300. See, for example, the Lasting power of attorney	
	creation pack or other relevant guidance booklets which are all available online or by post.	Part B: about your certificate
	Make sure you understand the purpose of this lasting power of	providers
	attorney and the extent of the authority you are giving your attorneys.	How many certificate providers do you have? (Tick one box)
١.	Read the separate Information sheet to understand all the people involved, and how the three parts of the form should be filled in.	
١.		
	read the section on page 2 called Information you must read before filling in their relevant part.	If you have used any continuation sheets each one must be signed
		and dated.  Attached to the back of this
1	This lasting power of attorney could be rejected	lasting power of attorney are:
•	at registration if it contains any errors.	(Write the number of each) continuation sheet A1
_		continuation sheet A2
		continuation sheet A3:HW 2 pages
		continuation sheet B
		Total number of
		continuation sheets
LP	A HW 10 09 © Crown copyright 2009	

Changes to legislation: There are currently no known outstanding effects for the The Lasting Powers of Attorney, Enduring Powers of Attorney and Public Guardian Regulations 2007. (See end of Document for details)

Page 2 of 12

# How to fill in this form

· Tick the boxes that apply like this



· Use black or blue ink and write clearly

Lasting power of attorney for health and welfare

 Cross through any boxes or sections that don't apply to you, like this:

Any other names you are known by in financial documents or accounts

 Don't use correction fluid – please cross out any mistakes and rewrite nearby. All corrections must be initialled by the person completing that section of the form (and their witness) like this:

Any other names you are known by in financial documents or accounts

WILLIAM EDWARD SMITH
A.S.B / WES. SMYTH

 Your application could be rejected if your intentions are not clear and explicit. If you are in any doubt, please start again on a new copy of the form.

#### What happens after you've filled it in?

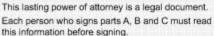
The next step is to register it. You or your attorneys can do this at any time. The person applying will need to fill in a registration form and may need to pay a fee at that time. They will also need to send notices to the 'people to be told' named at part A when the application to register this lasting power of attorney is made. You can find out more and download the registration form at publicguardian.gov.uk

The 'people to be told' are given time to raise any concerns or objections. This means the earliest the Office of Public Guardian can register this lasting power of attorney is 6 weeks after they notify the donor or attorneys that an application to register has been received.

Your lasting power of attorney will **end** if it can no longer be used. For example, if a sole attorney dies or can no longer act for you and no replacement attorney has been named in this lasting power of attorney. Please read the guidance available at publicguardian.gov.uk

#### . .

# Information you must read This lasting power of attorney is a legal document



#### Purpose of this lasting power of attorney

This lasting power of attorney gives your attorneys authority to make decisions about your health and welfare when you cannot make your own decisions. This can include where you live, who visits you and the type of care you receive.

#### When your attorneys can act for you

Your attorneys can use this lasting power of attorney only after it has been registered and stamped on every page by the Office of the Public Guardian. Your attorneys can only act when you lack the capacity to make the decision in question. You may have capacity to make some decisions about your personal health and welfare but not others.

#### The Mental Capacity Act

Your attorneys cannot do whatever they like. They must follow the principles of the Mental Capacity Act 2005.

Guidance about these principles is in the Mental Capacity Act Code of Practice. Your attorneys must have regard to the Code of Practice. They can get a copy from The Stationery Office at tso. co.uk or read it online at publicguardian.gov.uk

#### Principles of the Act that your attorneys must follow

- 1 Your attorneys must assume that you can make your own decisions unless they establish that you cannot do so.
- 2 Your attorneys must help you to make as many of your own decisions as you can. They cannot treat you as unable to make the decision in question unless all practicable steps to help you to do so have been made without success.
- 3 Your attorneys must not treat you as unable to make the decision in question simply because you make an unwise decision.
- 4 Your attorneys must make decisions and act in your best interests when you are unable to make the decision in question.
- 5 Before your attorneys make the decision in question or act for you, they must consider whether they can make the decision or act in a way that is less restrictive of your rights and freedom but still achieves the purpose.

#### Your best interests

Your attorneys must act in your best interests in making decisions for you when you are unable to make the decision in question yourself. They must take into account all the relevant circumstances. This includes, if appropriate, consulting you and others who are interested in your health and welfare. Any guidance you add may assist your attorneys in identifying your views.

#### Cancelling this lasting power of attorney

You can cancel this lasting power of attorney at any time before or after it is registered as long as you have mental capacity to cancel it. Please read the guidance available at publicguardian.gov.uk

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Yease write clearly using black or blue ink.		
1 About the person who is giving this lasting pov	ver of attorney	
Mr Mrs Ms Miss Other title  First names	Address and postcode	
Last name	Posterdo	
Date of birth	Any other names you are known by in medical records or welfare records	
O'D'M'M'Y'Y'Y'Y		
2 About the attorneys you are appointing		
<ul> <li>Each attorney must be aged 18 or over. Choose people You are recommended to read the separate guidance for for health and welfare.</li> <li>Your first or only attorney</li> </ul>		
Mr Mrs Ms Miss Other title	Please cross through this section if it does not apply.  Mr Mrs Ms Miss Other title	
First names of your first or only attorney	First names of your second attorney	
Last name of your first or only attorney	Last name of your second attorney	
Date of birth of your first or only attorney	Date of birth of your second attorney	
Address and postcode of your first or only attorney	Address and postcode of your second attorney	
Postcode	Postcode	
If you are appointing more than two attorneys, use continuation sheet A1 to tell us about your other attorneys.	Other attorneys you are appointing  Number of attorneys named in continuation sheet A1 attached to this lasting power of attorney  Cross through this box	
	if this does not apply	

age 4 of 12	Lasting power of attorney for health and welf-
3 About appointing replacements if an attorney of	an no longer act
	the does not want to act for you or who is permanently no ned, lack mental capacity or if they were married to you or or civil partnership annulled or dissolved.
Your first or only replacement attorney Please cros	s through this section if it does not apply.
Mr Mrs Ms Miss Other title	Date of birth of your first or only replacement
First names of your first or only replacement	Address and postcode of your first or only replacement
Last name of your first or only replacement	
	Postcode
If you are appointing more than one replacement, use continuation sheet A1 to tell us about your other replacement attorneys.	Other replacement attorneys you are appointing Number of replacement attorneys named in continuation sheet A1 attached to this lasting power of attorney  Cross through this box if this does not apply
Helpline  J 0300 456 0300  publicguardian.gov.uk	lice of the Public Guardian stamp

4 How you want your attorneys to make decisions Thinking about how you want your attorneys to make decisions	Choosing which decisions must be made together and which decisions may be made
If you leave this section blank, your attorneys will be appointed to make all decisions jointly.      Jointly: this means that the attorneys must make all decisions together. → For further information on appointing your attorneys jointly, see the separate guidance.      Jointly and severally: this means that attorneys can make decisions together and separately. This might be useful, for example, if one attorney is not available to make a decision at a certain time. If one attorney cannot act the remaining attorney is able to continue to make decisions.	Please make your intentions clear about how your attorneys are to make the decision in question, for example about where you live, who visits you and the type of care you receive. Please check that your intentions will work in practice – it may not be possible to register or use this lasting power of attorney if they are not workable. Please read the separate guidance for examples that will not work in practice.
<ul> <li>Jointly for some decisions, and jointly and severally for other decisions: this means that your attorneys must make certain decisions together and may make certain decisions separately. You will need to set out below how you want this to work in practice.</li> </ul>	
How you want your attorneys to make decisions If you are appointing only one attorney and no replaceme	ent attorneys, now go to section 5 →
Jointly	→ Go to section 5 and cross through the box below
Jointly and severally	→ Go to section 5 and cross through the box below
Only if you have ticked the last box above, now tell attorneys must make jointly and which decisions make	
	If you need more space, use continuation sheet A2

Page 6 of 12

#### Status: Point in time view as at 01/08/2012.

Changes to legislation: There are currently no known outstanding effects for the The Lasting Powers of Attorney, Enduring Powers of Attorney and Public Guardian Regulations 2007. (See end of Document for details)

Lasting power of attorney for health and welfare

5 About life-sustaining	treatment		
Life-sustaining treatment me doctor considers necessary tor not a treatment is life-sust the specific situation. Some to sustaining in some situations. The decisions you authorise you in this lasting power of all any advance decision you has same subject.  You must be clear whether or your attorneys this authority, please be clear about the chamight want to discuss this fire doctors and health profession.	o keep you alive. Whether aining will depend on reatments will be lifebut not in others. your attorneys to make for storney take the place of live already made on the root you want to give. This is very important so pice you are making. You st with your attorneys or	You must choose Option A Your attorneys can only mak sustaining treatment if you of choose Option B, your doctor where it is practicable and ap your attorneys and people wh welfare as well as any writter made. When you make your choice must have a witness. If you of a mark instead.  If you cannot sign or m continuation sheet A3: someone else must sign fe they must sign in your pres of two witnesses.	the decisions about life- thoose Option A. If you are will take into account appropriate the views of an ore interested in your a statement you may have and sign this section you cannot sign you can make that a mark use the arm of the country of
Option A	Do not sign both boxes	Option B	O Do not sign both boxes
is giving this lasting power of Your signature or mark	ining treatment on my witness by the person who of attorney	I do not want to give my at or refuse consent to life-st behalf. Signed in the presence of a who is giving this lasting po Your signature or mark	ustaining treatment on my a witness by the person
Date signed or marked  The date you sign (or mark) here must be the same as the date you sign or mark section 10 Declaration.	Date signed or marked	mark) here must be the same as the date you sign or mark section 10 Declaration.	
Who can be a witness You must be 18 or over. You cannot be an attorney or replacement attorney named at part A or any continuation sheets A to this lasting power of attorney. If you have been asked to be the certificate provider at part B, you can be a witness at part A. A person to be told when the application to register this lasting power of attorney is made can be a witness.		Witnessed by	
		Signature of witness  Full names of witness	
		Address and postcode of w	vitness

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6 About restrictions and conditions	
Putting restrictions and conditions	
into words	Restrictions and conditions about health and welfare
You should read the separate	
guidance for examples of conditions and restrictions that will not work in	
practice.	
Your attorneys must follow any	
restrictions or conditions you put in place. But it may not be possible to	
register or use this lasting power of	
attorney if a condition is not workable.	
<ul> <li>Either: give any restrictions and conditions about health and welfare</li> </ul>	
here	
Or: if you would like your attorneys to	
make decisions with no restrictions or conditions, you should cross through	If you need more space, use continuation sheet A2
this box.	
7 About guidance to your attorneys	
Putting guidance into words	Guidance to your attorneys about health and welfare
Any guidance you add may help your	
attorneys to identify your views. You do not have to add any.	
Your attorneys do not have to follow	
your guidance but it will help them to	
understand your wishes when they make decisions for you.	
Either: Give any guidance about	
health and welfare here	
<ul> <li>Or: if you have no guidance to add, please cross through this box.</li> </ul>	
	If you need more space, use continuation sheet A2
	If you need more space, use continuation sheet A2
8 About paying your attorneys	
Professional charges	Charges for services
Professional attorneys, such as     selicitors and assessations, shares for	
solicitors and accountants, charge for their services. You can also choose to	
pay a non-professional person for their	
services. You should discuss payment with your attorneys and record any	
agreement made here to avoid any	
confusion later.	
You can choose to pay non- professional attorneys for their	
services, but if you do not record any	
agreement here they will only be able to recover reasonable out-of-pocket	f you need more space, use continuation sheet A2
expenses	you need more space, use continuation sneet AZ
	→ For further information on paying attorneys, please see the separate
	guidance.
Helpline	only with Office of the Public Guardian stamp

	cation to register this lasting power of attorney is made
Thinking about people to be told	
	people to be told when your lasting power of attorney is being
	ell an opportunity to raise any concerns or objections before this
lasting power of attorney is registered and can	
<ul> <li>You do not have to choose anyone. But to sign the certificate to confirm under</li> </ul>	It if you leave this section blank, you must choose two people
	or replacement named at part A or in continuation sheets to part A.
The people to be told calliot be your attorney	or replacement marined of part A or in continuous in sinete to part A.
The first or only person to be told	The second person to be told
Please cross through this section if it does not appl	
Mr Mrs Ms Miss Other title	Mr Mrs Ms Miss Other title
First names of first or only person to be told	First names of second person to be told
Last name of first or only person to be told	Last name of second person to be told
Address and postcode of first or only person to be told	Address and postcode of second person to be told
10 00 1010	
Postcode	Postcode
Please cross through this section if it does not appl	
Other people to be told  Please cross through this section if it does not appl  Tell us about other people to be told on c  Number of other people to be told named in co sheet A1 attached to this lasting power of atto	ontinuation sheet A1.
Please cross through this section if it does not applied.  Tell us about other people to be told on confidence of other people to be told named in our people.	ontinuation sheet A1.
Please cross through this section if it does not applied.  Tell us about other people to be told on continuous and the people to be told named in or sheet A1 attached to this lasting power of atto	ontinuation sheet A1.

this later crossed through blank boxes that do not apply to you filled in any continuation sheets crossed through any mistakes you have made initialled any changes you have made initialled any changes you have made initialled any changes you have made.  No changes may be made to this lasting power of attorney and no continuation sheets may be added after part A has been filled in and signed. If any change appears to have been made, this lasting power of attorney will not be valid and will be rejected when an application is made to register it.  By signing (or marking) on this page, or by directing someone to sign continuation sheet A3:HW, I confirm all of the following:  Statement of understanding have read or had read to me:  the section called 'Information you must read' on page 2 all information contained in part A and any continuation sheets to part A of this lasting power of attorney.  appoint and give my attorneys authority to make decisions about my health and welfare, when I cannot act for myself because I lack mental capacity, subject to the terms of this lasting power of attorney and to the provisions of the Mental Capacity Act 2005.  Statement about life-sustaining treatment thave chosen option A or option B about life-sustaining treatment in section 5 of this lasting power of attorney.  The witness should be independent of you and:  Must be 18 or over.  Cannot be an attorney or replacement attorney named at part A or any continuation sheets to this lasting power of attorney.  Can be a certificate provider at part B.  Can be a person to be told when the application to register this lasting power of attorney is made.  Must initial any changes made in Part A.	to be told when the application to register
one per part B.  orossed through any mistakes you have made initialled any changes you have made.  No changes may be made to this lasting power of attorney and no continuation sheets may be added after part A has been filled in and signed. If any change appears to have been made, this lasting power of attorney will not be valid and will be rejected when an application is made to register it.  By signing (or marking) on this page, or by directing someone to sign continuation sheet A3:HW, I confirm all of the following:  Statement of understanding  I have read or had read to me:  the section called 'Information you must read' on page 2  all information contained in part A and any continuation sheets to part A of this lasting power of attorney.  appoint and give my attorneys authority to make decisions about my health and welfare, when I cannot act for myself because I lack mental capacity, subject to the terms of this lasting power of attorney and to the provisions of the Mental Capacity Act 2005.  Statement about life-sustaining treatment  I have chosen option A or option B about life-sustaining treatment in section 5 of this lasting power of attorney.  The witness should be independent of you and:  Must be 18 or over.  Cannot be an attorney or replacement attorney named at part A or any continuation sheets to this lasting power of attorney.  Can be a certificate provider at part B.  Can be a person to be told when the application to register this lasting power of attorney is made.  Must initial any changes made in Part A.  Addresses	ing power of attorney is made
No changes may be made to this lasting power of attorney and no continuation sheets may be added after part A has been filled in and signed. If any change appears to have been made, this lasting power of attorney will not be valid and will be rejected when an application is made to register it.  By signing (or marking) on this page, or by directing someone to sign continuation sheet A3:HW, I confirm all of the following:  Statement of understanding I have read or had read to me:  • the section called 'Information you must read' on page 2  • all information contained in part A and any continuation sheets to part A of this lasting power of attorney.  I appoint and give my attorneys authority to make decisions about my health and welfare, when I cannot act for myself because I lack mental capacity, subject to the terms of this lasting power of attorney and to the provisions of the Mental Capacity Act 2005.  Statement about life-sustaining treatment I have chosen option A or option B about life-sustaining treatment in section 5 of this lasting power of attorney.  The witness should be independent of you and:  • Must be 18 or over.  • Cannot be an attorney or replacement attorney named at part A or any continuation sheets to this lasting power of attorney.  • Can be a certificate provider at part B.  • Can be a person to be told when the application to register this lasting power of attorney is made.  • Must initial any changes made in Part A.  Address	osen the people to be told, and have chosen on to sign the certificate of understanding at
attorney and no continuation sheets may be added after part A has been filled in and signed. If any change appears to have been made, this lasting power of attorney will not be valid and will be rejected when an application is made to register it.  By signing (or marking) on this page, or by directing someone to sign continuation sheet A3:HW, I confirm all of the following:  Statement of understanding I have read or had read to me:  • the section called 'Information you must read' on page 2  • all information contained in part A and any continuation sheets to part A of this lasting power of attorney.  I appoint and give my attorneys authority to make decisions about my health and welfare, when I cannot act for myself because I lack mental capacity, subject to the terms of this lasting power of attorney and to the provisions of the Mental Capacity Act 2005.  Statement about life-sustaining treatment I have chosen option A or option B about life-sustaining treatment in section 5 of this lasting power of attorney.  The witness should be independent of you and:  • Must be 18 or over.  • Cannot be an attorney or replacement attorney named at part A or any continuation sheets to this lasting power of attorney.  • Can be a certificate provider at part B.  • Can be a person to be told when the application to register this lasting power of attorney is made.  • Must initial any changes made in Part A.  Address	
will not be valid and will be rejected when an application is made to register it.  By signing (or marking) on this page, or by directing someone to sign continuation sheet A3:HW, I confirm all of the following:  Statement of understanding I have read or had read to me:  • the section called 'Information you must read' on page 2  • all information contained in part A and any continuation sheets to part A of this lasting power of attorney.  I appoint and give my attorneys authority to make decisions about my health and welfare, when I cannot act for myself because I lack mental capacity, subject to the terms of this lasting power of attorney and to the provisions of the Mental Capacity Act 2005.  Statement about life-sustaining treatment I have chosen option A or option B about life-sustaining treatment in section 5 of this lasting power of attorney.  The witness should be independent of you and:  • Must be 18 or over.  • Cannot be an attorney or replacement attorney named at part A or any continuation sheets to this lasting power of attorney.  • Can be a person to be told when the application to register this lasting power of attorney is made.  • Must initial any changes made in Part A.  Address	vant anyone to be told, and have chosen two sign certificates of understanding at part B.
By signing (or marking) on this page, or by directing someone to sign continuation sheet A3:HW, I confirm all of the following:  Statement of understanding I have read or had read to me:  • the section called 'Information you must read' on page 2  • all information contained in part A and any continuation sheets to part A of this lasting power of attorney.  I appoint and give my attorneys authority to make decisions about my health and welfare, when I cannot act for myself because I lack mental capacity, subject to the terms of this lasting power of attorney and to the provisions of the Mental Capacity Act 2005.  Statement about life-sustaining treatment I have chosen option A or option B about life-sustaining treatment in section 5 of this lasting power of attorney.  The witness should be independent of you and:  • Must be 18 or over.  • Cannot be an attorney or replacement attorney named at part A or any continuation sheets to this lasting power of attorney.  • Can be a person to be told when the application to register this lasting power of attorney is made.  • Must initial any changes made in Part A.  Address  Address	nnot sign this lasting power of attorney make a mark instead.
directing someone to sign continuation sheet A3:HW, I confirm all of the following:  Statement of understanding I have read or had read to me:  • the section called 'Information you must read' on page 2  • all information contained in part A and any continuation sheets to part A of this lasting power of attorney.  I appoint and give my attorneys authority to make decisions about my health and welfare, when I cannot act for myself because I lack mental capacity, subject to the terms of this lasting power of attorney and to the provisions of the Mental Capacity Act 2005.  Statement about life-sustaining treatment I have chosen option A or option B about life-sustaining treatment in section 5 of this lasting power of attorney.  The witness should be independent of you and:  • Must be 18 or over.  • Cannot be an attorney or replacement attorney named at part A or any continuation sheets to this lasting power of attorney.  • Can be a person to be told when the application to register this lasting power of attorney is made.  • Must initial any changes made in Part A.  • Address  Address	u cannot sign or make a mark use
I have read or had read to me:  • the section called 'Information you must read' on page 2  • all information contained in part A and any continuation sheets to part A of this lasting power of attorney.  I appoint and give my attorneys authority to make decisions about my health and welfare, when I cannot act for myself because I lack mental capacity, subject to the terms of this lasting power of attorney and to the provisions of the Mental Capacity Act 2005.  Statement about life-sustaining treatment I have chosen option A or option B about life-sustaining treatment in section 5 of this lasting power of attorney.  The witness should be independent of you and:  • Must be 18 or over.  • Cannot be an attorney or replacement attorney named at part A or any continuation sheets to this lasting power of attorney.  • Can be a certificate provider at part B.  • Can be a person to be told when the application to register this lasting power of attorney is made.  • Must initial any changes made in Part A.  Address	continuation sheet A3:HW → Signed (or marked) by the person giving this
I have read or had read to me:  • the section called 'Information you must read' on page 2  • all information contained in part A and any continuation sheets to part A of this lasting power of attorney.  I appoint and give my attorneys authority to make decisions about my health and welfare, when I cannot act for myself because I lack mental capacity, subject to the terms of this lasting power of attorney and to the provisions of the Mental Capacity Act 2005.  Statement about life-sustaining treatment I have chosen option A or option B about life-sustaining treatment in section 5 of this lasting power of attorney.  The witness should be independent of you and:  • Must be 18 or over.  • Cannot be an attorney or replacement attorney named at part A or any continuation sheets to this lasting power of attorney.  • Can be a person to be told when the application to register this lasting power of attorney is made.  • Must initial any changes made in Part A.  Address	power of attorney and delivered as a deed
the section called 'Information you must read' on page 2  all information contained in part A and any continuation sheets to part A of this lasting power of attorney.  I appoint and give my attorneys authority to make decisions about my health and welfare, when I cannot act for myself because I lack mental capacity, subject to the terms of this lasting power of attorney and to the provisions of the Mental Capacity Act 2005.  Statement about life-sustaining treatment I have chosen option A or option B about life-sustaining treatment in section 5 of this lasting power of attorney.  The witness should be independent of you and:  Must be 18 or over.  Cannot be an attorney or replacement attorney named at part A or any continuation sheets to this lasting power of attorney.  Can be a certificate provider at part B.  Can be a person to be told when the application to register this lasting power of attorney is made.  Must initial any changes made in Part A.  Address	
all information contained in part A and any continuation sheets to part A of this lasting power of attorney.  I appoint and give my attorneys authority to make decisions about my health and welfare, when I cannot act for myself because I lack mental capacity, subject to the terms of this lasting power of attorney and to the provisions of the Mental Capacity Act 2005.  Statement about life-sustaining treatment I have chosen option A or option B about life-sustaining treatment in section 5 of this lasting power of attorney.  The witness should be independent of you and:  Must be 18 or over.  Cannot be an attorney or replacement attorney named at part A or any continuation sheets to this lasting power of attorney.  Can be a certificate provider at part B.  Can be a person to be told when the application to register this lasting power of attorney is made.  Must initial any changes made in Part A.  Address	
of attorney.  I appoint and give my attorneys authority to make decisions about my health and welfare, when I cannot act for myself because I lack mental capacity, subject to the terms of this lasting power of attorney and to the provisions of the Mental Capacity Act 2005.  Statement about life-sustaining treatment I have chosen option A or option B about life-sustaining treatment in section 5 of this lasting power of attorney.  The witness should be independent of you and:  Must be 18 or over.  Cannot be an attorney or replacement attorney named at part A or any continuation sheets to this lasting power of attorney.  Can be a certificate provider at part B.  Can be a person to be told when the application to register this lasting power of attorney is made.  Must initial any changes made in Part A.  Address	ned or marked
decisions about my health and welfare, when I cannot act for myself because I lack mental capacity, subject to the terms of this lasting power of attorney and to the provisions of the Mental Capacity Act 2005.  Statement about life-sustaining treatment I have chosen option A or option B about life-sustaining treatment in section 5 of this lasting power of attorney.  The witness should be independent of you and:  • Must be 18 or over.  • Cannot be an attorney or replacement attorney named at part A or any continuation sheets to this lasting power of attorney.  • Can be a certificate provider at part B.  • Can be a person to be told when the application to register this lasting power of attorney is made.  • Must initial any changes made in Part A.  Address  Address	I'M'Y'Y'Y'Y
Statement about life-sustaining treatment I have chosen option A or option B about life- sustaining treatment in section 5 of this lasting power of attorney.  The witness should be independent of you and:  Must be 18 or over.  Cannot be an attorney or replacement attorney named at part A or any continuation sheets to this lasting power of attorney.  Can be a certificate provider at part B.  Can be a person to be told when the application to register this lasting power of attorney is made.  Must initial any changes made in Part A.  Address  Address	
The witness should be independent of you and:  Must be 18 or over.  Cannot be an attorney or replacement attorney named at part A or any continuation sheets to this lasting power of attorney.  Can be a certificate provider at part B.  Can be a person to be told when the application to register this lasting power of attorney is made.  Must initial any changes made in Part A.  Address  Address	must sign (or mark) and date part A here ore parts B and C are signed and dated.
Must be 18 or over.  Cannot be an attorney or replacement attorney named at part A or any continuation sheets to this lasting power of attorney.  Can be a certificate provider at part B.  Can be a person to be told when the application to register this lasting power of attorney is made.  Must initial any changes made in Part A.  Address  Address	
Cannot be an attorney or replacement attorney named at part A or any continuation sheets to this lasting power of attorney. Can be a certificate provider at part B. Can be a person to be told when the application to register this lasting power of attorney is made.  Must initial any changes made in Part A.  Addressing section 5 (witnessing Option A or Option B)	ed by
named at part A or any continuation sheets to this lasting power of attorney.  Can be a certificate provider at part B.  Can be a person to be told when the application to register this lasting power of attorney is made.  Must initial any changes made in Part A.  Addressing Sign section 5 (witnessing Option A or Option B)	e of witness
Can be a person to be told when the application to register this lasting power of attorney is made.  Must initial any changes made in Part A.  Sign section 5 (witnessing Option A or Option B)  Address	
register this lasting power of attorney is made.  • Must initial any changes made in Part A.  • Sign section 5 (witnessing Option A or Option B)	
▲ Sign section 5 (witnessing Option A or Option B) Addres	es of witness
a bight section 5 (witnessing Option A or Option b)	and postcode of witness
nto in pienergiesiment o como a pienere intelle ne danakon en arabete intoiem er raner arabete ete intelle ne banna ka	
	Postcode

Your certificate provider fills in, signs and dates this part.	
Declaration by the person who is signing this certific	cate
Please refer to separate guidance for certificate providers. If the guidance is not followed, this lasting power of attorney may not be valid and could be rejected when an application is made to register it.  In part A (section 9) has the person giving this lasting power of attorney chosen at least one person to be told when the application to register this lasting power of attorney is made?  If yes = one certificate provider fills in this part and the second certificate provider must fill in continuation sheet B	How you formed your opinion  Before signing this certificate you must establish that the donor understands what it is, the authority they are giving their attorneys, and is not being pressurised into making it.  If someone challenges this lasting power of attorneyou may need to explain how you formed your opinion.  Statement of personal knowledge or relevant professional skills  Please cross through the box that does not apply.  EITHER  I have known the donor for at least two years
By signing below, I confirm:	I have known the donor for at least two years and as more than an acquaintance. My personal knowledge of the donor is:
My understanding of the role and responsibilities  I have read part A of this lasting power of attorney, including any continuation sheets.  I have read the section called 'Information you must read' on page 2 of this lasting power of attorney.  I understand my role and responsibilities as a certificate provider.  Statement of acting independently  I confirm that I act independently of the attorneys and of the donor and I am aged 18 or over.  I am not:  an attorney or replacement attorney named in this lasting power of attorney or any other lasting power of attorney or enduring power of attorney for the donor  a family member related to the donor or any of their attorneys or replacements  be a business partner or paid employee of the donor or any of their attorneys or replacements  the owner, director, manager or employee of a care home that the donor lives in, or a member of their family.	OR I have relevant professional skills. (Please state your profession – for example, a GP or solicitor – and then the particular skills that are relevant to you forming your opinion – for example, a consultant specialising in geriatric care.)  My profession and particular skills are:
	Continues over

the donor to create this lasting power of attorney there is nothing else which would prevent this lasting power of attorney from being created by the completion of this form.  Your signature  Do not sign until part A of this lasting power of attorney has been filled in and signed.  Sign as soon as possible after part A is signed. If this part is signed before part A is signed, this lasting power of attorney will not be valid and will be rejected when an		s certificate (continued)
toertify that, in my opinion, at the time of signing part A:  the donor understands the purpose of this lasting power of attorney and the scope of the suthority conferred under it on fraud or undue pressure is being used to induce the donor in create this lasting power of attorney or attorney from being created by the completion of this form.  Your signature  Do not sign until part A of this lasting power of attorney will not be valid and will be rejected when an application is made to register it.  Signature of certificate provider  Date signed  Miss Other title  Mr. Mrs. Ms. Miss Other title  First names of certificate provider  Last name of certificate provider  Address and postcode of certificate provider  Address and postcode of certificate provider  Postcode  Helpline  Valid only with Office of the Public Guardian stamp		
the donor understands the purpose of this lasting power of attorney and the scope of the authority conferred under it on fraud or undue pressure is being used to induce the donor to create this lasting power of attorney. There is nothing else which would prevent this lasting power of attorney from being created by the completion of this form.  Your signature  Do not sign until part A of this lasting power of attorney has been filled in and signed. If his part is signed before part A is signed, this lasting power of attorney will not be valid and will be rejected when an application is made to register it.  Signature of certificate provider  Date signed  Mr Mrs Ms Miss Other title  First names of certificate provider  Last name of certificate provider  Address and postoode of certificate provider  Postcode  Postcode  Will M'Y'Y'Y'  Date signed  Will M'Y'Y'Y'Y  Walld only with Office of the Public Guardian stamp		
power of attorney and the scope of the authority conferred under it  no fraud or undue pressure is being used to induce the donor to create this lasting power of attorney from being created by the completion of this form.  Your signature  Do not sign until part A of this lasting power of attorney has been filled in and signed. If this part is signed before part A is signed, this lasting power of attorney has been filled in and signed. If this part is signed before part A is signed, this lasting power of attorney with to be valid and will be rejected when an application is made to register it.  Signature of certificate provider  Postcode  Will M'Y'Y'Y'  Helpline  Valid only with Office of the Public Guardian stamp		Mr Mrs Ms Miss Other title
The infauld or undue pressure is being used to induce the donor to create this lasting power of attorney there is nothing else which would prevent this lasting power of attorney from being created by the completion of this form.  Your signature  Do not sign until part A of this lasting power of attorney has been filled in and signed. If this part is signed before part A is signed, if this part is signed before part A is signed, this lasting power of attorney will not be valid and will be rejected when an application is made to register it.  Signature of certificate provider  Date signed  MMYYYYY  Helpline  Walld only with Office of the Public Guardian stamp		
The donor to create this lasting power of attorney:  there is nothing else which would prevent this lasting power of attorney from being created by the completion of this form.  Your signature  Description on the part A of this lasting power of attorney has been filled in and signed. If this part is signed before part A is signed, this lasting power of attorney will not be valid and will be rejected when an application is made to register I.  Signature of certificate provider  Date signed  May Y Y Y Y  Helpline  Valid only with Office of the Public Guardian stamp	conferred under it	First names of contificate provider
there is nothing else which would prevent this lasting power of attorney from being created by the completion of this form.  Your signature  Do not sign until part A of this lasting power of attorney has been filled in and signed. If this part is signed before part A is signed. If this part is signed before part A is signed, this lasting power of attorney will not be valid and will be rejected when an application is made to register it.  Signature of certificate provider  Date signed  This is the provider is a signed before part A is signed. If this part is signed before part A is signed, this lasting power of attorney will not be valid and will be rejected when an application is made to register it.  Signature of certificate provider  Date signed  This is the provider is and postcode of certificate provider  Postcode  Helpline  Valid only with Office of the Public Guardian stamp	no fraud or undue pressure is being used to induce	First flames of certificate provider
lasting power of attorney from being created by the completion of this form.  Your signature  Do not sign until part A of this lasting power of attorney has been filled in and signed. If this part is signed before part A is signed, this lasting power of attorney will not be valid and will be rejected when an application is made to register I.  Signature of certificate provider  Date signed  TMMYYYYY  Helpline    Valid only with Office of the Public Guardian stamp		
Completion of this form.  Your signature  Do not sign until part A of this lasting power of attorney has been filled in and signed.  Sign as soon as possible after part A is signed. If this part is signed before part A is signed, this lasting power of attorney will not be valid and will be rejected when an application is made to register it.  Signature of certificate provider  Date signed  Date signed  Walid only with Office of the Public Guardian stamp		Last name of certificate provider
Do not sign until part A of this lasting power of attorney has been filled in and signed.  Sign as soon as possible after part A is signed. If this part is signed before part A is signed, this lasting power of attorney will not be valid and will be rejected when an application is made to register it.  Signature of certificate provider  Date signed  MMYYYYY  Wall only with Office of the Public Guardian stamp		
Do not sign until part A of this lasting power of attorney has been filled in and signed.  Sign as soon as possible after part A is signed. If this part is signed before part A is signed, this lasting power of attorney will not be valid and will be rejected when an application is made to register it.  Signature of certificate provider  Date signed  MMYYYYY  Wall only with Office of the Public Guardian stamp	Your signature	Address and postends of cadificate provider
Sign as soon as possible after part A is signed. If this part is signed before part A is signed, this lasting power of attorney will not be valid and will be rejected when an application is made to register it.  Signature of certificate provider  Date signed  MMYYYYY  Wild only with Office of the Public Guardian stamp	⚠ Do not sign until part A of this lasting power of	Address and postcode of certificate provider
part is signed before part A is signed, this lasting power of atterney will not be valid and will be rejected when an application is made to register it.  Signature of certificate provider  Date signed  MMYYYYY  MMYYYYY  Helpline  Valid only with Office of the Public Guardian stamp	attorney has been filled in and signed.	
of attorney will not be valid and will be rejected when an application is made to register it.  Signature of certificate provider  Date signed	Sign as soon as possible after part A is signed. If this	
Application is made to register it.  Signature of certificate provider  Date signed  D'D'M'M'Y'Y'Y'Y  Helpline  Valid only with Office of the Public Guardian stamp		
Date signed	application is made to register it.	Postcode
Date signed  Distribution of the Public Guardian stamp  Valid only with Office of the Public Guardian stamp	Signature of certificate provider	
Helpline  Valid only with Office of the Public Guardian stamp		
Helpline  Valid only with Office of the Public Guardian stamp		
Helpline  Valid only with Office of the Public Guardian stamp		
Helpline  Valid only with Office of the Public Guardian stamp		
Helpline  Valid only with Office of the Public Guardian stamp	Date signed	
Helpline Valid only with Office of the Public Guardian stamp		
	D M M Y Y Y Y	
	Helpline Valid only with Office	e of the Public Guardian stamp

Part C Declaration by each attor	orney or replacement attorney
ff you are appointing more than one attorney, including	ng replacement attorneys: photocopy
in this sheet before it is filled in so that each attorney ha	
Statement by the attorney or replacement attorney with Before a replacement can act for you, they must get in to original lasting power of attorney form. They will get guide.	uch with the Office of the Public Guardian and return the
By signing below, I confirm all of the following:	
Understanding of role and responsibilities I have read the section called 'Information you must read' on page 2 of this lasting power of attorney. I understand my role and responsibilities under this	For this lasting power of attorney to be valid and registered this part should not be signed before Part A or part B have been completed, signed and dated. Sign part C as soon as possible after part B is signed.
lasting power of attorney, in particular:  I have a duty to act based on the principles of the Mental Capacity Act 2005 and have regard to the Mental Capacity Act Code of Practice	Signed or marked by the attorney or replacement attorney as a deed and delivered (or if to be signe at their direction refer to separate guidance)
<ul> <li>I can make decisions and act only when this lasting power of attorney has been registered and when the person who is giving this lasting power of attorney lacks mental capacity</li> </ul>	Full name of [attorney] or [replacement attorney]
<ul> <li>I must make decisions and act in the best interests of the person who is giving this lasting power of attorney</li> </ul>	(delete as appropriate)
Further statement of replacement attorney If an original attorney's appointment is terminated, I will	Date signed or marked
replace the original attorney if I am still eligible to act as an attorney.	O'O'M'M'Y'Y'Y
I have the authority to act under this lasting power of attorney only after an original attorney's appointment is terminated and I have notified the Public Guardian of the event.	
The witness must be over 18 and can be:	Signature of witness
<ul> <li>another attorney or replacement attorney named at part A or in continuation sheet A to this lasting power of attorney</li> </ul>	
a certificate provider at part B of this lasting power of	
a person to be told when the application to register this lasting power of attorney is made.	Full name of witness
The donor cannot be a witness.  The witness must see the attorney or replacement attorney sign or make a mark.	Address and postcode of witness to the attorney's or replacement attorney's signature
	Postcode
Helpline Valid only with Offic	e of the Public Guardian stamp

	people					
Use this continuation sheet for details of all additional at Make copies of this sheet before filling it in if you need r	, ,	neys, or people to be told.				
About the additional people	nore than one sheet.					
For each additional person, provide the	For example:	OV:				
following details	Third attorney	Second replacement				
Whether you want them to act as an attorney, replacement attorney or person to be told	Mr John Smith,	attorney     Mrs Susan Jones				
If you don't make your requirements for each person clear this lasting power of attorney could be rejected at registration	38 London Street, Posttown, PC6 9ZZ     19 January 1960	27 Lincoln Road,     Posttown, PC7 9XX				
Their title, full name, address (including postcode)     Their date of birth		12 December 1962				
About you						
Name of person who is giving this lasting power		or signed by the direction				
About you  Name of person who is giving this lasting power of attorney  Date signed or marked  D'D'M'M'Y'Y'Y'						

Continuation sheet A2 – how your a	
AZ severally, restrictions & conditions,	nttorneys make decisions jointly and guidance, payment
Only use this continuation sheet to provide further additional Make copies of this sheet before filling it in if you need it	onal information about how you want your attorneys to ac nore than one sheet.
About the additional information	
For each additional piece of information you are pro  Which decisions your attorneys should make jointly and decisions they should make jointly and severally (only if the Restrictions and conditions) Guidance to your attorneys	which
Paying your attorneys	
About you	
About you  Name of person who is giving this lasting power of attorney	Signed or marked by (or signed by the direction of) the person giving this lasting power of attorney
Name of person who is giving this lasting power of attorney  Date signed or marked	
Name of person who is giving this lasting power of attorney	
Name of person who is giving this lasting power of attorney  Date signed or marked  D D M M Y Y Y Y  Please attach this sheet to the back of your lasting power of attorney before you sign and date the	of) the person giving this lasting power of attorned
Name of person who is giving this lasting power of attorney  Date signed or marked  D'D'M'M'Y'Y'Y  Please attach this sheet to the back of your lasting	of) the person giving this lasting power of attorne
Name of person who is giving this lasting power of attorney  Date signed or marked  D D M M Y Y Y Y  Please attach this sheet to the back of your lasting power of attorney before you sign and date the declaration in part A.  And number your continuation sheets consecutively.	of) the person giving this lasting power of attorned

<b>A3</b> :HW	Continuation sheet A3 (		
	et if you cannot sign or make a		power of attorney.
The person signing on beh	alf of the person giving this	Full name of the person sign	ning
two witnesses.  sign in their own name	nust ence <b>and</b> in the presence of		
not also be a witness.			
Option A	Do not sign both boxes	Option B	Do not sign both boxes
behalf.	staining treatment on my	I do not want to give my at or refuse consent to life-su behalf. Signature of someone sign giving this lasting power of	ing for the person who is
Date signed	The date you sign here must be the same as the date you sign below.	Date signed D'D'M'M'Y'Y'Y'Y	The date you sign here must be the same as the date you sign below.
Signature of someone s	signing on behalf of the perso	on giving this lasting power	of attorney
	ned at Option A or Option B i		ed by the person
Date signed	]	Signed as a deed and del of and directed by the per power of attorney and in	rson giving this lasting
each continuation sh sign part A here.	A or Option B above, and neet, at the same time as you ate part A here <i>before</i> parts and dated.	witnesses	
B and C are signed a			
B and C are signed a	eet has two pages. sign on the next page $ ightarrow$		
B and C are signed a  This continuation sho Two witnesses must  Number each page indivi-	sign on the next page → dually and attach both set A3:HW to the back of your	This is continuation sheet n	
B and C are signed a  This continuation sho Two witnesses must  Number each page indivi-	sign on the next page → dually and attach both	This is continuation sheet n Total number of continuatio	

Each witness	
Must be 18 or over.	Can be a certificate provider at part B, .     Can be a person to be told when the application to
Cannot be an attorney or replacement attorney named at part A or any continuation sheets A to this lasting power of attorney.	register this lasting power of attorney is made.  • Must initial any changes made in Part A.
Witnessed by	Also witnessed by
Signature of first witness	Signature of second witness
Date signed	Date signed
D'D'M'M'Y'Y'Y	D'D'M'M'Y'Y'Y
Full names of first witness	Full names of second witness
Address and postcode of first witness	Address and postcode of second witness
Postcode About you	Postcode
About you  Name of person who is giving this lasting power of attor  This continuation sheet has two pages.	rney
About you  Name of person who is giving this lasting power of attor	This is continuation sheet number
About you  Name of person who is giving this lasting power of attor  This continuation sheet has two pages.  Number each page individually and attach both pages of continuation sheet A3:HW to the back of your lasting power of attorney after they have been signed	This is continuation sheet number
About you  Name of person who is giving this lasting power of attor  This continuation sheet has two pages.  Number each page individually and attach both pages of continuation sheet A3:HW to the back of your lasting power of attorney after they have been signed	This is continuation sheet number
About you  Name of person who is giving this lasting power of attor  This continuation sheet has two pages.  Number each page individually and attach both pages of continuation sheet A3:HW to the back of your lasting power of attorney after they have been signed	This is continuation sheet number

age 1 of 2	Lasting power of attor
Continuation sheet B – declaration by certificate to confirm understanding	y your second certificate provider:
Your second certificate provider signs and dates this cont	inuation sheet
Declaration by the person who is signing this certifi	cate
Please refer to separate guidance for certificate providers.  If the guidance is not followed, this lasting power of attorney may not be valid and could be rejected when an application is made to register it.  In part A (property and financial affairs section 8, or health and welfare section 9) has the person giving this lasting power of attorney chosen at least one person to be told when the application to register this lasting power of attorney is made?  If yes = you only need one certificate provider so you do not need to fill in this continuation sheet  If no = the second certificate provider must fill in this continuation sheet  The donor is the person who is giving this lasting power of attorney.	How you formed your opinion  Before signing this certificate you must establish that the donor understands what it is, the authority they are giving their attorneys, and is not being pressurised into making it.  If someone challenges this lasting power of attorney you may need to explain how you formed your opinion.  Statement of personal knowledge or relevant professional skills  Please cross through the box that does not apply.  EITHER  I have known the donor for at least two years and as more than an acquaintance. My personal
By signing below, I confirm:  My understanding of the role and responsibilities I have read part A of this lasting power of attorney, including any continuation sheets. I have read the section called 'Information you must read' on page 2 of this lasting power of attorney. I understand my role and responsibilities as a certificate provider.  Statement of acting independently I confirm that I act independently of the attorneys and of the donor and I am aged 18 or over. I am not:  an attorney or replacement attorney named in this lasting power of attorney or any other lasting power of attorney or any other lasting power of attorney or enduring power of attorney for the donor  a family member related to the donor or any of their attorneys or replacements  the owner, director, manager or employee of a care home that the donor lives in, or a member of their family  a director or employee of a trust corporation appointed as an attorney or replacement attorney in this lasting power of attorney (for property and financial affairs only).	OR I have relevant professional skills. (Please state your profession – for example, a GP or solicitor – and then the particular skills that are relevant to you forming your opinion – for example, a consultant specialising in geriatric care'.)  My profession and particular skills are:
Number each page individually and attach both continuation sheet B pages to the back of your lasting power of attorney after you sign and date the declaration in part A.	This is continuation sheet number  Total number of continuation sheets  Continues over

provider: certificate to confirm under	standing
Declaration by the person who is signing this certification	ate (continued)
Things you certify  I certify that, in my opinion, at the time of signing part A:  the donor understands the purpose of this lasting power of attorney and the scope of the authority conferred under it  no fraud or undue pressure is being used to induce the donor to create this lasting power of attorney  there is nothing else which would prevent this	Name and address of the person who is signing this certificate  Mr Mrs Ms Miss Other title  First names of certificate provider
lasting power of attorney from being created by the completion of this form.	Last name of certificate provider
Your signature  Do not sign until part A of this lasting power of attorney has been filled in and signed.  Sign as soon as possible after part A is signed. If this part is signed before part A is signed, this lasting power of attorney will not be valid and will be rejected when an application is made to register it.	Address and postcode of certificate provider
Signature of certificate provider	
Date signed D'D'M'M'Y'Y'Y'Y	
Number each page individually and attach both pages of continuation sheet B to the back of your lasting power of attorney after you sign and date the declaration in part A.	This is continuation sheet number  Total number of continuation sheets
pages of continuation sheet B to the back of your lasting power of attorney after you sign and date the	

Changes to legislation: There are currently no known outstanding effects for the The Lasting Powers of Attorney, Enduring Powers of Attorney and Public Guardian Regulations 2007. (See end of Document for details)

#### SCHEDULE 2

Regulation 10

Notice of Intention to Apply for Registration of a Lasting Power of Attorney: LPA 001

#### LPA 001 10.07

# Notice of intention to apply for registration of a Lasting Power of Attorney

This notice must be sent to everyone named by the donor in the Lasting Power of Attorney as a person who should be notified of an application to register. Relatives are not entitled to notice unless named in the Lasting Power of Attorney.

The application to register may be made by the donor or the attorney(s).

Where attorneys are appointed to act together they all must apply to register.

Details of the named person————————————————————————————————————		
lame	Address	
elephone no.		
	Postcode	
To the named person - You have the right to ob Power of Attorney. You have <b>five weeks</b> from the Details of how to object and the grounds for doin	day on which this notice is	s given to object.
	<u> </u>	
Details of the Lasting Power of Attorney (LPA)		77035
Who is applying to register the LPA?	the donor	the attorney(s)
which type of LPA is being registered?	Property and Affairs	Personal Welfare
ou must complete separate applications for each PA you wish to register.)		
on what date did the donor sign the LPA?	D D M M Y Y	r Y
Details of the donor ———————————————————————————————————		
ull name	Address	
elephone no.		
	Postcode	

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Details of the attorney(s)—	
Name of 1st attorney	Address
Telephone no.	
	Postcode
solely together and independently	
together together in some matters and t	ogether and independently in others
Name of 2 <sup>nd</sup> attorney	Address
Telephone no	
Telephone no.	Postcode
☐ together ☐ together and independently	
together in some matters and together and independently	endently in others
Name of 3rd attorney	Address
Telephone no.	
	Postcode
together together and independently	
together in some matters and together and independent	endently in others
Name of 4 <sup>th</sup> attorney	Address
Telephone no.	
	Postcode
together together and independently	
<ul> <li>together in some matters and together and independent</li> </ul>	endently in others

	Print name	

Changes to legislation: There are currently no known outstanding effects for the The Lasting Powers of Attorney, Enduring Powers of Attorney and Public Guardian Regulations 2007. (See end of Document for details)

# How to object to the registering of a Lasting Power of Attorney (LPA)

You can ask the Office of the Public Guardian (OPG) to stop the LPA from being registered if one of the factual grounds at (A) below has occurred. You need to tell us by completing Form LPA7 which is available from the OPG and by providing evidence to accompany it. You must send us the completed LPA7 form within five weeks from the date this notice was given. Failure to tell us could result in the LPA being registered.

(A) Factual grounds - you can ask the Office of the Public Guardian to stop registration if:

- The Donor is bankrupt or interim bankrupt (for property and affairs LPAs only)
- · The Attorney is bankrupt or interim bankrupt (for property and affairs LPAs only)
- · The Attorney is a trust corporation and is wound up or dissolved (for property and affairs LPAs only)
- The Donor is dead
- · The Attorney is dead
- That there has been dissolution or annulment of a marriage or civil partnership between the Donor and Attorney (except if the LPA provided that such an event should not affect the instrument)
- The Attorney(s) lack the capacity to be an attorney under the LPA
- · The Attorney(s) have disclaimed their appointment

Form LPA7 is available from the OPG on 0845 330 2900 or www.publicguardian.gov.uk

You have the right to object to the Court of Protection about the registration of the LPA, but only on the grounds mentioned at (B) below. To do this you must contact the Court and complete the application to object form they will send you. Using that form, you must set out your reasons for objecting. They must receive the objection within five weeks from the date this notice was given. You must also notify the OPG when you object to the Court by using the separate form LPA8 that the Court will send you. Failure to notify the OPG of an objection may result in registration of the LPA.

Note: If you are objecting to the appointment of a specific attorney, it will not prevent registration if other attorneys or a substitute attorney have been appointed.

- (B) Prescribed grounds you can only object to the Court of Protection against registration of the LPA on the following grounds:
  - That the power purported to be created by the instrument\* is not valid as a LPA. e.g. the person
    objecting does not believe the donor had capacity to make an LPA.
  - That the power created by the instrument no longer exists e.g. the donor revoked it at a time when he/ she had capacity to do so.
  - · That fraud or undue pressure was used to induce the donor to make the power.
  - The attorney proposes to behave in a way that would contravene his authority or would not be in the donor's best interests.

Note: \* The instrument means the LPA made by the donor.

The Court will only consider objections made if they are made on the above grounds. To obtain a Court objection form please contact the Court of Protection at Archway Tower, 2 Junction Road, London N19 5SZ or Telephone 0845 330 2900.

**Changes to legislation:** There are currently no known outstanding effects for the The Lasting Powers of Attorney, Enduring Powers of Attorney and Public Guardian Regulations 2007. (See end of Document for details)

## SCHEDULE 3

Regulation 11

Application to Register a Lasting Power of Attorney: LPA 002

Application to register a Lasting Power of Attorney					F	Of An	irn ye fice o chwa Junct ndon	of the y To ion f	Pu wer Roa	iblic d							
Part 1 - The donor																	
	Place a cr	oss (x) agains	t one	ption													
	Mr.	Mrs.	Ms.		N	liss		0	ther								
			If ot spe	her, ple cify	ease												
Last name												Ι			$\Box$	$\perp$	
First name				П	T		Т	Т			$\top$	Τ			Т	$\top$	
Middle name	е 🔲				Ī		T	T			Ť	T				Ī	]
Address 1								Ι				Ι				I	
Address 2				П			T	Τ				Τ				Τ	
Address 3				П	I		Ι	Ι				Ι				I	]
Town/City								Τ				Τ				Τ	]
County								T				T				T	
Postcode			]	Dayti Tel. n	me	I			T	][						I	]
Date of birth		MYYY	Y	If the	exac		te is u										
e-mail address			П	П	Т		Т	Т			$\top$	Τ	Г		Т	$\top$	1

LPA002 Application to register a lasting power of attorney (10.07)

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Status: Point in time view as at 01/08/2012.

Part 2 - The persons making the application	7
Note: We need to know who is applying and how the attorney(s) have been appoints questions in parts two and three carefully.	ed, please answer the
Place a cross (	x) against one option
Is the donor applying to register the Lasting Power of Attorney?	Yes
Is the attorney(s) applying to register the Lasting Power of Attorney?	Yes
Part 3 - How have the attorney(s) been appointed?	
The LPA states whether the attorney is to act solely, together or together and independent	ndently
Place a cross (	x) against one option
There is only one attorney appointed	
There are attorneys appointed together and independently	
There are attorneys appointed together	
There are attorneys appointed together in some matters and together and independently in others	
Note: We need to know which, if any of the attorney(s) are making this application t LPA. You can tell us this by putting a cross in the box at the start of each attorney(s) Part 4.	

Part 4 - A	torney one														
Place a cross (x) in this box if attorney one is applying to register															
	Place a cross (x) against one option														
	Mr. Mrs. Ms. Miss Other														
	If other, please specify														
Last name															
First name															
Middle name															
Company name (if relevant)															
Address 1															
Address 2															
Address 3															
Town/City															
County															
Postcode	DX number														
Date of birth	DX Exchange														
Daytime Tel. no.															
Occupation															
e-mail address															
Place a cross Civil partner	(x) against one option that best describes your relationship to the donor  Spouse Child Solicitor Other Other professional														
If 'Ot	er' or 'Other professional', please specify														

Part 4 - At	ttorney two
	s (x) in this box if attorney two is applying to register
	Place a cross (x) against one option
	Mr. Mrs. Ms. Miss Other
	If other, please specify
Last name	
First name	
Middle name	
Company name (if relevant)	
Address 1	
Address 2	
Address 3	
Town/City	
County	
Postcode	DX number
Date of birth	D D M M Y Y Y Y
Daytime Tel. no.	
Occupation	
e-mail address	
Place a cross Civil partner	s (x) against one option that best describes your relationship to the donor  / Spouse Child Solicitor Other Other professional
If 'Ot	her' or 'Other professional', please specify  4

Part 4 - A	torney three														
Place a cross (x) in this box if attorney three is applying to register															
	Place a cross (x) against one option														
	Mr. Mrs. Ms. Miss Other														
	If other, please specify														
Last name															
First name															
Middle name															
Company name (if relevant)															
Address 1															
Address 2															
Address 3															
Town/City															
County															
Postcode	DX number														
Date of birth	DX Exchange														
Daytime Tel. no.															
Occupation															
e-mail address															
Place a cross Civil partner	(x) against one option that best describes your relationship to the donor  Spouse Child Solicitor Other Other professional														
If 'Ot	er' or 'Other professional', please specify														

Feart 4 - At	ttorney	four															atto			<u>-</u>	
Place a cross (x) in this box if attorney four is applying to register												please provide the following details in the 'Additional information' section at the end of this form.									
	Place a cross (x) against one option																				
	Mr.	Mrs.	Ш	Ms.	Ш	Mi	ss		С	ther		╛									
				If othe speci	er, plea	ase [															
Last name								Ι													
First name																		Ι	Ι		
Middle name																					
Company name (if relevant)								Ι													
Address 1																					
Address 2																					
Address 3																					
Town/City																					
County																					
Postcode									DX numb	ber											
Date of birth		M M Y	YY	Y	DX Exc	han	ge [														
Daytime Tel. no.																					
Occupation																					
e-mail address																					
Place a cross Civil partner			otion th	$\neg$	descri Solicit		you		tion:	ship	to t				fess	sion	al [				
If 'Ot	her' or 'O	ther profe	ssiona	l', pleas	se spe	cify 6												$\Box$			

Part 5 - N	otification	of nam	ed pe	rsons								٦			
donor in the The date on named perso	The donor or attorney(s) making the application must give notice to the named persons nominated by the donor in the section of the LPA marked 'Notifying others when an application to register your LPA is made'. The date on which the notice was given <b>must</b> be completed (which is the date it was posted or given to the named person). If the donor decided not to notify any named persons, please place a cross in the box provided.  The donor did not specify any named individuals in the LPA														
	The donor did not specify any named individuals in the LPA														
	Place a cross (x) against one option														
	I We														
	have given notice to register in the prescribed form (LP1) to the following person(s):														
Date notice															
given	D D M	MYY	Y Y												
Last name															
First name															
Address 1															
Address 2															
Address 3															
Town/City															
County															
Postcode															

Feart 5 - co	ontinued	$\neg$
Date notice given	D D M M Y Y Y	
Last name		
First name		
Address 1		
Address 2		
Address 3		
Town/City		
County		
Postcode		
Date notice given	D D M M Y Y Y Y	
Last name		
First name		
Address 1		
Address 2		
Address 3		
Town/City		
County		
Postcode	8	1

Part 5 - co	ontinued
Date notice given	D D M M Y Y Y Y
Last name	
First name	
Address 1	
Address 2	
Address 3	
Town/City	
County	
Postcode	
Date notice given	D D M M Y Y Y Y
Last name	
First name	
Address 1	
Address 2	
Address 3	
Town/City	
County	
Postcode	

Part 6 - Fees		٦
Guidelines on fee exemption and remission can be obtained from the Office of the	e Public Guardia	an.
Have you enclosed a cheque for the registration fee for this application?	Yes	No
Do you wish to apply for remission of the fee?	Yes	No
Do you wish to apply for exemption of the fee?	Yes	No
Do you wish to apply for postponement of the fee?	Yes	No
If you wish to apply for exemption, remission or postponement of all or part of the the separate application form available from the Office of the Public Guardian.	fee. You must o	complete
Part 7 - Type of power		
I We		
apply to register the LPA (the original of which accompanies this ap donor under the provisions of the Mental Capacity Act 2005.	plication) made	by the
What type of Lasting Power of Attorney are you applying to register?		
Property and affairs OR Personal welfare		
Date that the <b>donor</b> signed the Lasting Power of Attorney  D D M M Y Y Y Y		
To your knowledge, has the donor made any other Enduring Powers of Attorney or Lasting Power of Attorney?	Yes	No
If Yes, please give details below including registration date if applicable		

Part 8 - D	onor d	ec	lar	ati	on	1																				ı
	Note: This section should only be completed by the donor if they are applying for the registration of the Lasting Power of Attorney.																									
I apply to re	apply to register the Lasting Power of Attorney (the original of which accompanies this application).																									
completed the	certify that the above information is correct and that to the best of my knowledge and belief, I have completed the application in accordance with the provisions of the Mental Capacity Act 2005 and all statutory instruments made under it.																									
Signed															1	Date										
																			Ъ	D	M	М	Υ	Υ	Υ	Υ
Last name									T	Т	Г															
First name																										
Part 9 - A Note: This s Lasting Pow	ection sh	oul	d or	nly i					d by																	
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Signature of authorised person(s)																]			Co	mpa	any	sea	l (If	арр	lical	ble)	
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Changes to legislation: There are currently no known outstanding effects for the The Lasting Powers of Attorney, Enduring Powers of Attorney and Public Guardian Regulations 2007. (See end of Document for details)

Ī	Part 11 - Correspondence address					
		Place a cross (x) against one option				
		Mr. Mrs. Ms. Miss Other				
		If other, please specify				
	Last name					
	First name					
	Middle name					
	Company name					
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	Address 1					
	Address 2					
	Address 3					
	Town/City					
	County					
	Postcode	DX number				
		DX Exchange				
	Daytime Tel. no.					
	e-mail address					

13

ease write down any add tach additional sheets.	litional information to su	upport this application	in the space below. If necessary	у

Changes to legislation: There are currently no known outstanding effects for the The Lasting Powers of Attorney, Enduring Powers of Attorney and Public Guardian Regulations 2007. (See end of Document for details)

## [F16SCHEDULE 3A

Regulation 13

## **Textual Amendments**

**F16** Sch. 3A inserted (1.10.2011) by The Public Guardian (Fees, etc.) (Amendment) Regulations 2011 (S.I. 2011/2189), reg. 1, **Sch.** 

Repeat Application to Register a Lasting Power of Attorney: LPA 002R

Repeat A	oplication to register a	
	ower of Attorney	Issue date
J	,	
of Attorney (LPA provided in this application and	s you to submit a repeat application to re A), where your original LPA was invalid. form will be added to the information in any information from your new LPA. Ple ned in OPG's letter for details on how to	The information your original ease refer to the
Donor's name:		
Case number:		
LPA type:		
Name(s) of app	licant(s):	
Corresponden	ce details:	
Notification of	people to be told (please choose one	)
☐ The donor o	lid not specify any people to be told in the	ne LPA
or		
☐ I/We have g	iven notice to these people to be told or	n the following date(s):
First name	Surname	Date Notice given

Status: Point in time view as at 01/08/2012.

Changes to legislation: There are currently no known outstanding effects for the The Lasting Powers of Attorney, Enduring Powers of Attorney and Public Guardian Regulations 2007. (See end of Document for details)

FEE	•					
Plea	se choose one of the following.					
	A cheque has been enclosed with this application.					
	I would like to pay the fee with a debit or credit card.					
	Please provide your number so we can telephone you to payment:	o arrange				
	I/We have already applied for a remission or exemption	of the fees.				
	I/We would like to apply for a remission or exemption no enclosed the appropriate form with evidence relating to teligibility.					
Арр	licant's declaration					
	☐ We					
	<ul> <li>apply to register the Lasting Power of Attorney (the original of which accompanies this application);</li> </ul>					
• (	certify that the above information is correct; and					
<ul> <li>certify that to the best of my/our knowledge and belief, I/we have completed the application in accordance with the provisions of the Mental Capacity Act 2005 and all statutory instruments made under it.</li> </ul>						
Sign	ed	Date				

]

Changes to legislation: There are currently no known outstanding effects for the The Lasting Powers of Attorney, Enduring Powers of Attorney and Public Guardian Regulations 2007. (See end of Document for details)

## SCHEDULE 4

Regulation 13

Notice of Receipt of an Application to Register a Lasting Power of Attorney: LPA 003A and LPA 003B

Part 1: Notice to an Attorney of Receipt of an Application to Register a Lasting Power of Attorney

Changes to legislation: There are currently no known outstanding effects for the The Lasting Powers of Attorney, Enduring Powers of Attorney and Public Guardian Regulations 2007. (See end of Document for details)

## LPA 003A 10.07

## Notice to an attorney of receipt of an application to register a Lasting Power of Attorney

Name of attorney				
Take notice				
An application to register a Lasting Power of Attorney (LPA) has been rec Guardian.	ceived by the Office of the Public			
We are sending you this notice because you are named as an attorney in the LPA and were not involved in the application to register.				
You are hereby given notice of the proposed registration. You have the right to object to the registration. Details of how to do so are set out on page 2 of this notice. You have five weeks in which to object from the date this notice was given. (We will treat this notice as having been given two days after the date below.)				
The names of the donor and the attorney(s) are set out below:				
Donor's full name				
The following attorney(s) have applied to register an LPA in the name of statorney's full name  Attorney's full name	the above donor.			
Attorney's full name				
From Da The Office of the Public Guardian Archway Tower, 2 Junction Road London N19 5SZ	ated			
Telephone 0845 330 2900	© Crown copyright 2007			

Changes to legislation: There are currently no known outstanding effects for the The Lasting Powers of Attorney, Enduring Powers of Attorney and Public Guardian Regulations 2007. (See end of Document for details)

#### How to object to the registering of a Lasting Power of Attorney (LPA)

You can ask the Office of the Public Guardian (OPG) to stop the LPA from being registered if one of the factual grounds at (A) below has occurred. You need to tell us by completing Form LPA7 which is available from the OPG and by providing evidence to accompany it. You must send us the completed LPA7 form within five weeks from the date this notice was given. Failure to tell us could result in the LPA being registered.

(A) Factual grounds - you can ask the Office of the Public Guardian to stop registration if:

- · The Donor is bankrupt or interim bankrupt (for property and affairs LPAs only)
- · The Attorney is bankrupt or interim bankrupt (for property and affairs LPAs only)
- · The Attorney is a trust corporation and is wound up or dissolved (for property and affairs LPAs only)
- The Donor is dead
- · The Attorney is dead
- That there has been dissolution or annulment of a marriage or civil partnership between the Donor and Attorney (except if the LPA provided that such an event should not affect the instrument)
- · The Attorney lacks the capacity to be an attorney under the LPA
- · The Attorney disclaimed their appointment

Form LPA7 is available from the OPG on 0845 330 2900 or www.publicguardian.gov.uk

You have the right to object to the Court of Protection about the registration of the LPA, but only on the grounds mentioned at (B) below. To do this you must contact the Court and complete the application to object form they will send you. Using that form, you must set out your reasons for objecting. They must receive the objection within five weeks from the date this notice was given. You must also notify the OPG when you object to the Court by using the separate form LPA8 that the Court will send you. Failure to notify the OPG of an objection may result in registration of the LPA.

Note: If you are objecting to the appointment of a specific attorney, it will not prevent registration if other attorneys or substitute attorneys have been appointed.

- (B) Prescribed grounds you can only object to the Court of Protection against registration of the LPA on the following grounds:
  - That the power purported to be created by the instrument\* is not valid as a LPA. e.g. the person
    objecting does not believe the donor had capacity to make an LPA.
  - That the power created by the instrument no longer exists e.g. the donor revoked it at a time when he/ she had capacity to do so.
  - · That fraud or undue pressure was used to induce the donor to make the power.
  - The attorney proposes to behave in a way that would contravene his authority or would not be in the donor's best interests.

Note: \* The instrument means the LPA made by the donor.

The Court will only consider objections made if they are made on the above grounds. To obtain a Court objection form please contact the Court of Protection at Archway Tower, 2 Junction Road, London N19 5SZ or telephone 0845 330 2900.

**Changes to legislation:** There are currently no known outstanding effects for the The Lasting Powers of Attorney, Enduring Powers of Attorney and Public Guardian Regulations 2007. (See end of Document for details)

#### LPA 003B 10.07

# Notice to donor of receipt of an application to register a Lasting Power of Attorney

Name of donor
Take notice
An application to register your Lasting Power of Attorney (LPA) has been received by the Office of the Public Guardian (OPG).
We are sending you this notice because your attorney(s) in the LPA has asked the OPG to register your LPA, so that it can be used.
You are hereby given notice of the proposed registration. You have a right to object to the registration. You have five weeks in which to object from the date this notice was given. (We will treat this notice as having been given two days after the date below). You can object by using form LPA6, which you can get from the OPG.
The names of your attorney(s) are set out below:
Attorney's full name
Dated
From
The Office of the Public Guardian Archway Tower, 2 Junction Road

The Office of the Public Guardian Archway Tower, 2 Junction Road London N19 5SZ Telephone 0845 330 2900

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**Changes to legislation:** There are currently no known outstanding effects for the The Lasting Powers of Attorney, Enduring Powers of Attorney and Public Guardian Regulations 2007. (See end of Document for details)

## SCHEDULE 5

Regulation 17

Notice of Registration of a Lasting Power of Attorney: LPA 004

Notice of registration of a Lasting Power of Attorney
This notice is to confirm registration of a Lasting Power of Attorney.
Case no.
The donor
The attorney(s)
The Lasting Power of Attorney was entered into the register on
Notification of registration of the LPA is given as required in Schedule 1 Part 2 Paragraph 15 of the Mental Capacity Act 2005.

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Changes to legislation: There are currently no known outstanding effects for the The Lasting Powers of Attorney, Enduring Powers of Attorney and Public Guardian Regulations 2007. (See end of Document for details)

#### SCHEDULE 6

Regulation 20

Disclaimer by Donee of a Lasting Power of Attorney: LPA 005

#### LPA 005 10.07

## Disclaimer by a proposed or acting attorney under a Lasting Power of Attorney

Take notice that					
a proposed attorney					
an attorney acting under a Lasting Power of Attorney					
has disclaimed appointment.					
Details of attorney discl	aiming appointment ————————————————————————————————————				
Name	Address				
Telephone no.					
	Postcode				
Date of the Lasting Power of Attorney  On what date was the Lasting Power of Attorney made?  D D M M Y Y Y Y					
On what date was the East.	ng Power of Attorney made?				
Signature and date ——					
I disclaim my appointment a	s attorney under the Lasting Power of Attorney made by the donor.				
Signed					
Dated	D D M M Y Y Y				

Note: Where the LPA has been registered then a copy of this notice must be sent to the Office of the Public Guardian at: Archway Tower, 2 Junction Road, London N19 5SZ

Call OPG on 0845 330 2900 with any questions.

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Details of the donor —		
Name	Address	
Telephone no.	Postcode	
Details of the other stars and a	Postcode	
Details of the other attorney(s)		
Name Telephone no.	Address	
	Postcode	
Name	Address	
Telephone no.		
	Postcode	
Name	Address	
Telephone no.	_	
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Changes to legislation: There are currently no known outstanding effects for the The Lasting Powers of Attorney, Enduring Powers of Attorney and Public Guardian Regulations 2007. (See end of Document for details)

## SCHEDULE 7

Regulation 23

Notice of Intention to Apply for Registration of an Enduring Power of Attorney

[F17

#### **Textual Amendments**

F17 Sch. 7 Form substituted (1.5.2010) by The Lasting Powers of Attorney, Enduring Powers of Attorney and Public Guardian (Amendment) Regulations 2010 (S.I. 2010/1063), reg. 1, Sch. 1 (with reg. 8)

Changes to legislation: There are currently no known outstanding effects for the The Lasting Powers of Attorney, Enduring Powers of Attorney and Public Guardian Regulations 2007. (See end of Document for details)

#### Form EP1PG

### Mental Capacity Act 2005 Enduring Power of Attorney

Notice of intention to apply for registration of an Enduring Power of Attorney

То	 	
Of	 	

This form may be adapted for use by three or more attorneys. Any attorney who is appointed to act jointly and severally, but who does not join in the application, must also be named.

Give the name and address of the donor

The grounds upon which you can object are limited and are shown at 2 overleaf 1. You have the right to object to the proposed registration on one or more of the grounds set out below. If you object, you must notify the Office of the Public Guardian and state which of the grounds you are relying on within five weeks from the day this notice was given to you. You may make an application to the Court of Protection under rule 68 of the Court of Protection Rules 2007 for a decision on the matter. No fee is payable for such an application. If you do not make such an application, the Public Guardian may ask for the court's directions about registration.

EP1PG - 02.10

Changes to legislation: There are currently no known outstanding effects for the The Lasting Powers of Attorney, Enduring Powers of Attorney and Public Guardian Regulations 2007. (See end of Document for details)

Note: The instrument means the document used to make the enduring power of attorney made by the donor, which it is sought to register

The attorney(s) does not have to be a relative. Relatives are not entitled to know of the existence of the enduring power of attorney prior to being given this notice

Our staff will be able to assist you with any general questions about the possible objections. However, they cannot provide advice about your particular objection.

Note: Part 4 is addressed only to the donor

Note: This notice should be signed by every one of the attorneys who are applying to register the enduring power of attorney

Note:
The attorney(s)
must keep a
record of the
date on which
notice was given
to the donor and
to relatives. This
information will
be required from
the attorney(s)
when an
application to
register the EPA
is made

- 2. The grounds on which you may object to the proposed registration are:
  - That the power purported to be created by the instrument is not valid as an enduring power of attorney
  - That the power created by the instrument no longer subsists
  - That the application is premature because the donor is not yet becoming mentally incapable
  - That fraud or undue pressure was used to induce the donor to make the power
  - That the attorney is unsuitable to be the donor's attorney (having regard to all the circumstances and in particular the attorney's relationship to or connection with the donor).
- 3. You can obtain the necessary forms to object by.
  - · Writing to us at the address on the foot of this form
  - Calling us on 0845 330 2900
  - Downloading the forms from our website at www.publicguardian.gov.uk

4. You are informed that while the enduring power of attorney remains registered, you will not be able to revoke it until the Court of Protection confirms the revocation.

Signed:	Dated:
Signed:	Dated:

Please write to:
Office of the Public Guardian
PO Box 15118
Birmingham
B16 6GX

www.publicguardian.gov.uk

EP1PG - 02.10

Document Generated: 2024-05-24

Status: Point in time view as at 01/08/2012.

Changes to legislation: There are currently no known outstanding effects for the The Lasting Powers of Attorney, Enduring Powers of Attorney and Public Guardian Regulations 2007. (See end of Document for details)

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## **SCHEDULE 8**

Regulation 24

## Application to Register an Enduring Power of Attorney

[F18

#### **Textual Amendments**

F18 Sch. 8 Form substituted (1.5.2010) by The Lasting Powers of Attorney, Enduring Powers of Attorney and Public Guardian (Amendment) Regulations 2010 (S.I. 2010/1063), reg. 1, Sch. 2 (with reg. 8)

Changes to legislation: There are currently no known outstanding effects for the The Lasting Powers of Attorney, Enduring Powers of Attorney and Public Guardian Regulations 2007. (See end of Document for details)

## Office of the Public Guardian Mental Capacity Act 2005 Form EP2PG

## Application for Registration of an Enduring Power of Attorney

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Page 1 of 7

Changes to legislation: There are currently no known outstanding effects for the The Lasting Powers of Attorney, Enduring Powers of Attorney and Public Guardian Regulations 2007. (See end of Document for details)

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Page 2 of 7

Changes to legislation: There are currently no known outstanding effects for the The Lasting Powers of Attorney, Enduring Powers of Attorney and Public Guardian Regulations 2007. (See end of Document for details)

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Page 3 of 7

Part Four Continued Overleaf

Changes to legislation: There are currently no known outstanding effects for the The Lasting Powers of Attorney, Enduring Powers of Attorney and Public Guardian Regulations 2007. (See end of Document for details)

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Page 4 of 7

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Address 1:									
Address 2:									
Address 3:									
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Please place a cross in the box 🗵 if									
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Page 5 of 7

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Changes to legislation: There are currently no known outstanding effects for the The Lasting Powers of Attorney, Enduring Powers of Attorney and Public Guardian Regulations 2007. (See end of Document for details)

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Page 7 of 7

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#### EXPLANATORY NOTE

(This note is not part of the Regulations)

These Regulations supplement the requirements set out in Schedule 1 to the Mental Capacity Act 2005 (c. 9) ("the Act") which apply to the making and registration of lasting powers of attorney and the requirements set out in Schedule 4 to the Act which apply to the registration of enduring powers of attorney. The Regulations also confer functions on the Public Guardian and make other provision in connection with functions conferred on him by the Act or by these Regulations. Part 1 of the Regulations is general and contains a number of definitions and interpretative provisions.

Part 2 of, and Schedules 1 to 6 to, the Regulations deal with lasting powers of attorney. Under section 9(2)(b) of the Act, a lasting power of attorney is not created unless it has (amongst other things) been made and registered in accordance with Schedule 1 to the Act. Regulation 5 (and Schedule 1) set out the forms of instruments to be used to make a lasting power of attorney. A different form must be used according to whether the instrument is intended to confer authority to make decisions about the donor's personal welfare, or about his property and affairs. Regulations 6 to 8 make detailed provision about the content of the instrument. Regulation 9 specifies the steps that must be taken to execute the instrument and the sequence in which those steps must be taken. Regulations 10 to 17 make provision about the procedure for registering an instrument as a lasting power of attorney, and Schedules 2 to 5 set out the application form and the form of notices to be used at different stages of the process. There are also certain other requirements specified which relate to the registration process.

Regulations 18 to 22 contain a number of miscellaneous provisions that apply to instruments which have been registered as lasting powers of attorney. These provisions specify steps to be taken if an instrument is changed, revoked, lost or destroyed. Regulation 20 (and Schedule 6) set out the form to be used by the donee of a lasting power when he wishes to disclaim his appointment.

Part 3 of, and Schedules 7 and 8 to, the Regulations deal with enduring powers of attorney. No new enduring power of attorney may be created after the commencement of section 66(1)(b) of the Act, but Schedules 4 and 5 to the Act apply to any power that was created before then. Regulation 23 (and Schedule 7) set out the form of notice to be given to the donor, and to his relatives, when an attorney under an enduring power intends to apply for registration. Regulation 23 also requires that the notice be given to the donor personally, together with an explanation of its effect. Regulations 24 to 28 (and Schedule 8) specify certain other requirements applying to the registration process and regulation 29 specifies steps to be taken if an instrument creating an enduring power of attorney is lost or destroyed after it has been registered.

Part 4 of the Regulations confers a number of specific functions on the Public Guardian. It also makes provision in connection with functions conferred on him by the Act or by these Regulations.

Additional functions are conferred by regulations 43, 45 and 48. Regulation 43 deals with the making of applications to the Court of Protection, regulation 45 sets out functions in relation to persons who are authorised to carry out a particular transaction and regulation 48 sets out functions in relation to enduring powers of attorney.

There are also provisions relating to the registers which the Public Guardian is required to maintain under the Act (regulations 30 to 32); relating to the giving of any security and the replacement, maintenance, enforcement or discharge of a security which has been endorsed (regulations 33 to 37); relating to the information that a deputy appointed by the Court of Protection must give to the Public Guardian (regulations 38 to 41); and relating to the review of a decision made by the Public Guardian in relation to a deputy (regulation 42). Regulations 44, 46

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and 47 make provision in connection with a number of other areas where the Public Guardian has functions, including the requirements to be met when visits on any person are carried out by, or at the direction of, the Public Guardian (regulation 48).

## **Status:**

Point in time view as at 01/08/2012.

## **Changes to legislation:**

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