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(1).

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(2), 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.

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(3);

"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(4); and

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

- (a) the General Social Care Council;
- (b) the Care Council for Wales;
- (c) the Scottish Social Services Council; or
- (d) the Northern Ireland Social Care Council.

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.

- (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—

^{(3) 2000} c.14.

^{(4) 2002} c.17.

- (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.
 - (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.

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

- **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.
 - (2) 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 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) if different, 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.

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 of 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.

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.
 - (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,

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(5).

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—
 - (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 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.

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(6) 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(7) under that section; and
 - (c) Schedule 2 to that Act.

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.
- (3) In any other case, the security may not be discharged until the end of the period of 7 years commencing with whichever of the following dates first occurs—
 - (a) if the person on whose behalf S was appointed to act dies, the date of his death;
 - (b) if S dies, the date of his death;
 - (c) 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;

⁽⁷⁾ 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.

- (d) 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.

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—

- (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.** 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.

Signed by authority of the Lord Chancellor.

Cathy Ashton,
Parliamentary Under-Secretary of State,
Department for Constitutional Affairs

16th April 2007

SCHEDULE 1

Regulation 5

Form for instrument intended to create a Lasting Power of Attorney

Part 1: Form for instrument intended to create a property and affairs Lasting Power of Attorney

LPA PA 10.07

Lasting Power of Attorney Property and Affairs

For official use only
Date of registration

This is a Lasting Power of Attorney (LPA). It allows you (the donor) to choose someone (the attorney) to make decisions on your behalf. Your attorney(s) can only use the completed LPA after it has been registered with the Office of the Public Guardian (OPG).

Getting started

Before you complete this LPA you **must** read the prescribed information on the next three pages so that you understand the purpose and legal consequences of making an LPA. You should refer to the separate notes on how to complete this LPA when you are directed to because they will help you to complete it.

Things you will need to do to complete this LPA

- decide who to appoint as your attorney(s) in the LPA
- decide if you want to appoint a replacement attorney in case your attorney(s) cannot act for you
- decide whether you want anyone to be notified when an application is made to register your LPA and, if you do, who you want to be notified
- choose at least one independent person to provide a certificate at Part B of the LPA
- fill in part A of the LPA. Your certificate provider(s) will need to complete Part B. Your attorney(s) will need to complete Part C
- have a witness to your signature at the end of Part A of the LPA

What to do after completing this LPA

An LPA can only be used after it has been registered with the OPG, so you will need to think about when you want it to be registered. There is a fee to register an LPA. Further information about how to register an LPA and what happens following registration is available from the OPG.

Information for you, your attorney(s) and your certificate provider(s) is available from the OPG. If you have any questions about how to complete this LPA please contact the OPG.

Office of the Public Guardian

Archway Tower

London N19 5SZ

0845 330 2900

www.publicguardian.gov.uk



Important - This form **cannot** be used until it has been registered by the Office of the Public Guardian and stamped on **every** page.

© Crown copyright 2007

PRESCRIBED INFORMATION

Lasting Power of Attorney — Property and Affairs

You must read this information carefully to understand the purpose and legal consequences of making an LPA. You must ask your attorney(s) and certificate provider(s) to read it too.

This form is a legal document known as a Lasting Power of Attorney (LPA). It allows you to authorise someone (the attorney(s)) to make decisions on your behalf about spending your money and managing your property and affairs. Your attorney(s) can only use the LPA after it is registered with the OPG.

If you want someone to make decisions about your personal welfare then you need a different form. You can get a Lasting Power of Attorney — Personal Welfare from the OPG and legal stationers.

Detailed information about why you might find an LPA useful is in the 'Guide for people who want to make a Property and Affairs LPA'. You can get this from the OPG. You should read this guide before completing this LPA. You should ask your attorney(s) and certificate provider(s) to read it too.

Your attorney(s) cannot do whatever they like. They must follow the principles of the Mental Capacity Act 2005 which are:

- a person must be assumed to have capacity unless it is established that the person lacks capacity;
- a person is not to be treated as unable to make a decision unless all practicable steps to help the person to do so have been taken without success;
- a person is not to be treated as unable to make a decision merely because the person makes an unwise decision:
- an act done, or decision made, under the Mental Capacity Act for or on behalf of a person who lacks capacity must be done, or made, in the person's best interests; and
- before the act is done, or the decision is made, regard must be had to whether the purpose for which it is needed can be as effectively achieved in a way that is less restrictive of the person's rights and freedom of action.

Guidance about the principles is in the Mental Capacity Act 2005 Code of Practice. Your attorney(s) will have a duty to have regard to the Code. Copies of the Code can be obtained from Her Majesty's Stationary Office.

- CHOOSING YOUR ATTORNEY Your attorney should be a person you know and trust who is at least 18 or a trust corporation. Your attorney must not be an undischarged or interim bankrupt. You can choose more than one attorney.
- 2. CHOOSING MORE THAN ONE ATTORNEY If you choose more than one attorney you must decide whether your attorneys should act together or together and independently (that is they can all act together but they can also act separately if they wish). You may appoint your attorneys together in respect of some matters and together and independently in respect of others. If you appoint more than one attorney and do not state whether they are appointed together or together and independently, when your LPA is registered they will be treated on the basis that they are appointed together. In this LPA, 'together' means jointly and 'together and independently' means jointly and severally for the purposes of the Mental Capacity Act 2005.

Please do not detach these notes. They are part of the Lasting Power of Attorney.

PRESCRIBED INFORMATION

- CHOOSING A REPLACEMENT ATTORNEY You can name a replacement(s) in case an
 attorney is unable to or no longer wishes to continue acting for you. Your attorney(s) can change
 their mind and may not want to act for you. If this is the case, they must tell you and the OPG.
- 4. WHEN AN ATTORNEY CAN ACT Once your LPA is registered your attorney(s) can act before you lack capacity and after you lack capacity. You may restrict your attorney(s) to act only when you lack capacity in your LPA. There is no one point at which you are treated as having lost capacity to manage your property and affairs. Your attorney(s) must help you to make as many of your own decisions as you can. When decisions have to be taken for you, your attorney(s) must always act in your best interests.
- 5. DECISIONS YOUR ATTORNEY CAN MAKE FOR YOU An attorney for property and affairs may make any decision that you could make about your property and affairs e.g. buy or sell property, manage investments or carry on a business and may access personal information. This is subject to the authority you give them and any decisions excluded by the Mental Capacity Act 2005. Some decisions will also involve personal welfare matters, such as a move to residential care. Your property and affairs attorney(s) will then need to consider your best interests with your attorney(s) for personal welfare (if you have one).
- 6. RESTRICTING THE POWERS OF YOUR ATTORNEY(S) OR ADDING CONDITIONS You can put legally binding restrictions and conditions on your attorney(s)' powers and the scope of their authority in the LPA. But these decisions may still need to be made and other people will have to decide for you. That could involve going to the Court of Protection and a decision being made in your best interests.
- GIVING GUIDANCE TO YOUR ATTORNEY You can also give guidance to your attorney(s) in your LPA. This is not legally binding but should be taken into account when they are making decisions for you.
- 8. PAYING ATTORNEYS An attorney is entitled to be reimbursed for out-of-pocket expenses incurred in carrying out their duties. Professional attorneys, such as solicitors or accountants, charge for their services. You should discuss and record any decision you make about paying your attorney(s) in the LPA.
- 9. NOTIFYING OTHER PEOPLE BEFORE REGISTRATION You can name up to five people to be notified when an application to register your LPA is made. Anyone about to apply for registration of an LPA must notify these people. This gives you an important safeguard because if you lack capacity at the time of registration you will be relying on these people to raise any concerns they may have about the application to register. If you choose not to name anyone to be notified you will need to have two certificate providers under Part B of this form.
- 10. CERTIFICATE TO CONFIRM UNDERSTANDING Once you have filled in Part A of this form an independent person must fill in the certificate at Part B to confirm that, in their opinion, you are making the LPA of your own free and will, that you understand its purpose and the powers you are giving your attorney(s). This is an important safeguard and your LPA cannot be registered unless the certificate is completed.

Please do not detach these notes. They are part of the Lasting Power of Attorney.

PRESCRIBED INFORMATION

- 11. REGISTERING THE LPA Your LPA cannot be used until it has been registered with the OPG. Either you or your chosen attorney(s) can apply to register the LPA. If you register it immediately it can be used straightaway unless you have specified that it should only be used when you lack capacity. The form for registering the LPA is available from the OPG together with details of the registration fee.
- 12. REGISTER OF LPAs There is a register of LPAs kept by the OPG. It is possible to access the register of LPAs but access is controlled. On application to the OPG, and payment of a fee, people can find out basic information about your LPA. At the discretion of the OPG and according to the purpose for which they need it, they may be able to find out further information. There is additional guidance available from the OPG on the register.
- 13. CHANGING YOUR MIND You can cancel your LPA even after it is registered if you have the mental capacity to do so. You need to take formal steps to revoke the LPA. You must tell your attorney if you do and, if it is registered, you will need to ask the OPG to remove it from the register of LPAs.

FURTHER NOTICE FOR ATTORNEY(S)

You should read the 'Guide for people taking on the role of Property and Affairs attorney' under an LPA before you agree to become an attorney and complete Part C of this LPA. The guide contains detailed information about what your role and responsibilities will be.

You must contact the OPG at once if the person you are acting for dies. If you are unable to continue acting you should take steps to disclaim the power and notify the OPG and the donor.

FURTHER NOTICE FOR CERTIFICATE PROVIDER(S)

You should read the separate 'Certificate Providers and witness guidance' before you agree to become a certificate provider and complete Part B of this LPA. The guidance contains detailed information about your role and responsibilities. You may also like to read the guidance for property and affairs attorneys and donors. If you have any concerns about an LPA you are asked to certify please contact the OPG.

Please do not detach these notes. They are part of the Lasting Power of Attorney.

4

PART A - Donor's statement four details I. My name and date of birth are: Mr. Mrs. Ms. Miss Other First name Middle name(s) Last name Date of birth D D M M Y Y Y Y Any other names you are known by or have been known by in the past (e.g. maiden name)		nnot be used until it has been registered by the OPG and stamped on	every page.
Mr. Mrs. Ms. Other First name Middle name(s) Last name Date of birth D D M M Y Y Y Y Any other names you are known by or have been known by in the past (e.g. maiden name) 2. My contact details and e-mail are: Address Postcode Telephone no. Mobile no.			2, 3 and 4 and you
/ Our details I. My name and date of birth are: Mr.	o help you comp	lete the form, please refer to the Notes for completing an LPA — Prop	erty and Affairs.
My name and date of birth are: Mr. Mrs. Ms. Miss Other First name Middle name(s) Last name Date of birth DDMMVYYYY Any other names you are known by or have been known by in the past (e.g. maiden name) 2. My contact details and e-mail are: Address Postcode Telephone no. Mobile no.	PART A – D	onor's statement	
Mr. Mrs. Ms. Miss Other First name Middle name(s) Last name Date of birth DDMMMYYYYY Any other names you are known by or have been known by in the past (e.g. maiden name) 2. My contact details and e-mail are: Address Postcode Telephone no. Mobile no.	our details		
First name Middle name(s) Last name Date of birth DDMMMYYYYY Any other names you are known by or have been known by in the past (e.g. maiden name) 2. My contact details and e-mail are: Address Postcode Telephone no. Mobile no.	I. My name and	late of birth are:	See No
Middle name(s) Last name Date of birth DDMMMYYYYY Any other names you are known by or have been known by in the past (e.g. maiden name) 2. My contact details and e-mail are: Address Postcode Telephone no. Mobile no.		☐ Mr. ☐ Mrs. ☐ Ms. ☐ Miss ☐ Other	
Last name Date of birth D D M M Y Y Y Y Any other names you are known by or have been known by in the past (e.g. maiden name) 2. My contact details and e-mail are: Address Postcode Telephone no. Mobile no.	First name		
Date of birth D D M M Y Y Y Y Any other names you are known by or have been known by in the past (e.g. maiden name) 2. My contact details and e-mail are: Address Postcode Telephone no. Mobile no.	Middle name(s		
Any other names you are known by or have been known by in the past (e.g. maiden name) 2. My contact details and e-mail are: Address Postcode Telephone no. Mobile no.	Last name		
(e.g. maiden name) 2. My contact details and e-mail are: Address Postcode Telephone no. Mobile no.	Date of birth	D D M M Y Y Y	
2. My contact details and e-mail are: Address Postcode Telephone no. Mobile no.			See Not
Address Postcode Telephone no. Mobile no.	(e.g. maiden i	ame)	
Address Postcode Telephone no. Mobile no.			
Postcode			
Telephone no. Mobile no.	2. My contact det	ails and e-mail are:	See Not
Telephone no. Mobile no.		ails and e-mail are:	See Not
Mobile no.		ails and e-mail are:	See Not
			See Nah
	Address		See Not
	Address Telephone no		See Not

Mental Capacit	llowing atto	orney(s) in a	ccordance v	with the provi	sions of the	See Not
	Attorney					
	Mr.	Mrs.	Ms.	Miss	Other _	Sec No
First name(s)						
Last name						
	Attorney Mr.	☐ Mrs.	☐ Ms.	☐ Miss	Other	
First name(s)						
Last name						
	Appointm	ent of a trust	corporation	n as attorney		See Nor
Company name						Note: (You do not have to appoint a trust corporation as one of your attorneys)
						as one of your attorneys)

you only have one attorney please cross through this page.	
. If you are appointing more than one attorney, how do you wish them to act? (If you do not choose an option your attorneys will be appointed together)	See Note
□together	See Note
together and independently	
together in respect of some matters and together and independently in respect of others	
If together in respect of some matters and together and independently in respect of others, details are as follows:	

5. I wish to appoi	nt a replace	ement attorne	ey: (You do n	ot have to a	ppoint a rep	nacement a	ittorriey).	Sez No	
Ye									
If Yes, I appoir	t the follow	ing replacen	nent attorney	r:					
	Mr.	Mrs.	Ms.	Miss	Other			SEE No	ā
First name(s)									
Last name									
Restrictions or section your file	the appoir	ntment of a r ment will repl	eplacement ace the first	attorney: (If attorney who	you do not o needs rep	complete th	iis	See No	

u can use this section to specify that your LPA is only to be used when you lack capaci ecify this, you should specify anything you want the attorney(s) to do to confirm that you ake the decision in question.	ty. If you decide to u lack capacity to
u may also use this section to place restrictions on the ability of your attorney(s) to use airs to make gifts. Any restrictions and/or conditions you set out below must be followe	your property and d by the attorney(s).
l wish to place restrictions and/or conditions on my attorney(s) in relation to my property and affairs:	See Note
☐Yes ☐No	
If Yes, the restrictions and conditions are as follows:	

	r attorney(s) should consider the guidance set out below when making decisions in your best interests.	
7.	wish my attorney(s) to consider the following guidance:	
B. 1	have agreed to pay my attorney(s) a fee to act as my attorney(s):	
3. 1	Noted Continuous	
	☐Yes ☐No	2/72
		200
	☐Yes ☐No	
	☐Yes ☐No	Title Control
	☐Yes ☐No	
	☐Yes ☐No	双花
	☐Yes ☐No	
	☐Yes ☐No	双花
	☐Yes ☐No	ovce.
	☐Yes ☐No	
	☐Yes ☐No	
	☐Yes ☐No	

n the following p	people, the	named perso	ons', to be no	otified when a	n applicatio	n to registe	er my LPA is ma
	Mr.	Mrs.	Ms.	☐ Miss	Other	•	
Full name							
							_
Address							
			Postco	de			
Telephone no).						
E-mail addres	ss						
	☐ Mr.	Mrs.	Ms.	☐ Miss	Other	•	
Full name							
							_
Address							
			Postco	de			
Telephone no).						
E-mail addres	20						
E-mail address	~						
	☐ Mr.	Mrs.	☐ Ms.	Miss	Othe		
	IVII.	IVIIS.	IVIS.	IVIISS			_
Full name							
Address							
			Postco	de			
Telephone no	.						_
relephone ne							_
E-mail addres	ss						

Status: This is the original version (as it was originally made).

Full name		<u> </u>	***************************************	************			
Address							
			Postcoo	ie 📗			
Tolophana aa							
Telephone no							
E-mail addres	is						
	Mr.	Mrs.	Ms.	Miss	Other		
Full name							
Address							
			Postcoo	ie 💮			
Telephone no							
E-mail addres	is						
	not include	e anvone hei	e vou must	have two cert	ificate prov	iders at	Part B
If you do	7 1101 11101000	, any one no	o , ou muot	1010 1110 001	mouto prov	14010 41	. uit D.
If you do							
If you do							
If you do							
If you do							
If you do							
If you do							
If you do							
If you do							
If you do							
If you do							

		See Note
	I have read the prescribed information on pages 2, 3 and 4	of this LPA.
	or	
	The prescribed information has been read to me by	
11. I confirm that		
	I intend to give my attorney(s) authority to make decisions behalf, including in circumstances when I lack capacity sub-restrictions I have made.	
12. I confirm that		
	the persons named in paragraph 9 are to be notified when a to register this LPA is made	an application See Note
	or	
	I do not want anyone to be notified when an application to made and I understand that I need two people to provide a certificate each at Part B of this LPA.	
13. I confirm that		
	I have chosen my certificate provider(s) myself.	Set Note:
14. Signed by me		See Note:
as a deed		If you are unable to sign
45 Data danad		the form, please refer to the notes for completion and turn
15. Date signed (delivered as	D D M M Y Y Y Y	to page 14 of this LPA.
a deed)		
In the presence	e of	
In the presence	e of	See Note
	e of	See Note 2
16. Signature of witness	e of	See Note 3
16. Signature of witness 17. Full name	e of	See Note :
16. Signature of witness	e of	See Note
16. Signature of witness17. Full name of witness	e of	See Note:
16. Signature of witness 17. Full name	e of	See Note :
16. Signature of witness17. Full name of witness18. Address of	e of	See Note
16. Signature of witness17. Full name of witness18. Address of		See Notes
16. Signature of witness17. Full name of witness18. Address of	Postcode Postcode	See Note:
16. Signature of witness17. Full name of witness18. Address of		See Note
16. Signature of witness17. Full name of witness18. Address of		SCENOIC
16. Signature of witness17. Full name of witness18. Address of		See Notes
16. Signature of witness17. Full name of witness18. Address of		See Note
16. Signature of witness17. Full name of witness18. Address of	Postcode Postcode	See Note.
16. Signature of witness17. Full name of witness18. Address of		

I am signing this	LPA at the donor's direction and in the donor's presence:	Sec No. 6
19. Signed as a deed		
20. Date signed (delivered as a deed)	D D M M Y Y Y Y	
21. Full name		
22. Address		
	Postcode Postcode	
In the presence	of	
23. Signature of witness		See Note:
24. Full name of witness		
25. Address of witness		
	Postcode Postcode	
26. Signature of witness		
27. Full name of witness		
28. Address of witness		
	Postcode	

		See Note
on pages 2, 3 and guidance' produc	e provider, must read Part A and B of this LPA, and the prescribed informated 4. You should also read the separate 'Certificate provider and witness ced by the OPG before completing the certificate. You must discuss the LPA thout the attorney(s) present.	
I confirm that I the person(s) a	am acting independently of the person making this LPA (the donor) and appointed under the LPA and in particular I am not a person listed in the 'Who cannot provide a certificate?'.	See Note:
above section		
I am aged 18 c		See Note:
I am aged 18 c		See Note
I am aged 18 c The certificate Name and con First name	provider tact details of certificate provider Mr. Mrs. Ms. Miss Other	See Note
I am aged 18 c The certificate Name and con First name Middle name(s	provider tact details of certificate provider Mr. Mrs. Ms. Miss Other	See Note
I am aged 18 c The certificate Name and con First name	provider tact details of certificate provider Mr. Mrs. Ms. Miss Other	See Note
I am aged 18 c The certificate Name and con First name Middle name(s	provider tact details of certificate provider Mr. Mrs. Ms. Miss Other	See Note
I am aged 18 c The certificate Name and con First name Middle name(s	provider tact details of certificate provider Mr. Mrs. Ms. Miss Other	See Note
I am aged 18 c The certificate Name and con First name Middle name(s	provider tact details of certificate provider Mr. Mrs. Ms. Miss Other Postcode Postcode	See Note
I am aged 18 control of the certificate Name and control of the certificate Name and control of the certificate Name and control of the certificate Address	provider tact details of certificate provider Mr. Mrs. Ms. Miss Other Postcode Postcode	See Note

Category A – Knowledge certification		Sen Note
I have known the donor personally over the la	ast two years.	
How do you know them?		
Category B - Skills certification		See Note
l am:		
a registered healthcare professional (includes GP)	a barrister, solicitor or advocate	
a registered social worker	an Independent Mental Capacity	Advocate (IMCA)
none of the above but consider that I have certificate provider.	e the relevant professional skills and expert	ise to be a
My relevant professional skills and experti	ise are:	
☐ I confirm that I have read Parts A and B of thi	is LPA, and the prescribed information	< See No e
_		See Note
☐ I confirm that I have read Parts A and B of thi on pages 2, 3 and 4. ☐ I confirm that I have discussed the contents of	of this LPA with the donor and that the	See Note
I confirm that I have read Parts A and B of thi on pages 2, 3 and 4. I confirm that I have discussed the contents of attorney(s) was not present. I understand that I should make efforts to discussed.	of this LPA with the donor and that the cuss this LPA with the donor without	See Note See Note
I confirm that I have read Parts A and B of thi on pages 2, 3 and 4. I confirm that I have discussed the contents of attorney(s) was not present. I understand that I should make efforts to discussion present; and	of this LPA with the donor and that the cuss this LPA with the donor without	See Note See Note
I confirm that I have read Parts A and B of thi on pages 2, 3 and 4. I confirm that I have discussed the contents of attorney(s) was not present. I understand that I should make efforts to discussion present; and I have discussed this LPA with the done	of this LPA with the donor and that the cuss this LPA with the donor without or without anyone else present	See Note
on pages 2, 3 and 4. I confirm that I have discussed the contents of attorney(s) was not present. I understand that I should make efforts to discussed this LPA with the done or	of this LPA with the donor and that the cuss this LPA with the donor without or without anyone else present	See Note
I confirm that I have read Parts A and B of thi on pages 2, 3 and 4. I confirm that I have discussed the contents of attorney(s) was not present. I understand that I should make efforts to discussed the contents of anyone present; and I have discussed this LPA with the done or	of this LPA with the donor and that the cuss this LPA with the donor without or without anyone else present	See Note See Note
I confirm that I have read Parts A and B of thi on pages 2, 3 and 4. I confirm that I have discussed the contents of attorney(s) was not present. I understand that I should make efforts to discussed present; and I have discussed this LPA with the done or	of this LPA with the donor and that the cuss this LPA with the donor without or without anyone else present	See Note
I confirm that I have read Parts A and B of thi on pages 2, 3 and 4. I confirm that I have discussed the contents of attorney(s) was not present. I understand that I should make efforts to discussed present; and I have discussed this LPA with the done or	of this LPA with the donor and that the cuss this LPA with the donor without or without anyone else present	See Note See Note See Note
I confirm that I have read Parts A and B of thi on pages 2, 3 and 4. I confirm that I have discussed the contents of attorney(s) was not present. I understand that I should make efforts to discussed present; and I have discussed this LPA with the done or	of this LPA with the donor and that the cuss this LPA with the donor without or without anyone else present	See Note See Note

certify								
I certify that in my opinion, at the time when	the donor is m	aking thi	is LPA	, tha	t:			
the donor understands the purpose of	this LPA and th	ne scope	of the	e aut	hority u	nder it;		
no fraud or undue pressure is being u	sed to induce t	he donor	r to cre	eate t	this LPA	A; and		
there is nothing else that would preven	nt this LPA beir	ng create	ed.					
Do not sign this certificate if you have any dou have to the attention of the OPG.	bt about any o	f the abo	ve. Yo	ou sh	ould bri	ng any	concerns	you
Signature of certificate provider	Date	signed						
1 74	О	D M	м	Y ,	YY	Υ	<u> </u>	
Full name of certificate provider								

											See Note 4
ou, the certificate	also read th	e separate 'C	Certific	ate pro	ider an	d witr	ness g	uidan	ce' pro	duced b	y the OPG
efore completing t											
appointed under provide a certific		d in particula	ar I am	not a pe	rson liste	ed in t	he abo	ove sec	ction 'W	/ho canr	not
I am aged 18 or The certificate portains Name and contains	rovider	f certificate p	rovider								
he certificate p	rovider	f certificate p	rovider		Miss	c	Other _				
The certificate posts	rovider ct details of				Miss	c	Other _				
The certificate position Name and contain Time First name	rovider ct details of				Miss	c	Other _				
The certificate position Name and contain First name Middle name(s)	rovider ct details of				Miss	c	Other _				
The certificate position Name and contain First name Middle name(s) Last name	rovider ct details of				Miss	c	Other _				
The certificate position Name and contain First name Middle name(s) Last name	rovider ct details of		☐ Ms.		Miss		Other				
The certificate position Name and contain First name Middle name(s) Last name	rovider ct details of	Mrs. [☐ Ms.		Miss	c	Other				
The certificate position Name and contain First name Middle name(s) Last name	rovider ct details of	Mrs. [☐ Ms.		Miss	c	Other				
The certificate position Name and contain First name Middle name(s) Last name	rovider ct details of	Mrs. [☐ Ms.		Miss		Other _				

ategory A – Knowledge certification	
I have known the donor personally over the la	ast two years.
How do you know them?	
Category B - Skills certification	
am:	
a registered healthcare professional (includes GP)	a barrister, solicitor or advocate
a registered social worker	an Independent Mental Capacity Advocate (IMCA)
none of the above but consider that I have certificate provider.	e the relevant professional skills and expertise to be a
My relevant professional skills and experti	ise are;
confirm and understand I confirm that I have read Parts A and B of thi I confirm that I have discussed the contents of	s LPA, and the prescribed information on pages 2, 3 and 4. of this LPA with the donor and that the attorney(s)
confirm and understand I confirm that I have read Parts A and B of thi I confirm that I have discussed the contents of was not present.	s LPA, and the prescribed information on pages 2, 3 and 4. of this LPA with the donor and that the attorney(s)
confirm and understand I confirm that I have read Parts A and B of thi I confirm that I have discussed the contents of was not present. I understand that I should make efforts to discussed.	s LPA, and the prescribed information on pages 2, 3 and 4. of this LPA with the donor and that the attorney(s) cuss this LPA with the donor without anyone present; and
confirm and understand I confirm that I have read Parts A and B of thi I confirm that I have discussed the contents of was not present. I understand that I should make efforts to discussed this LPA with the done.	s LPA, and the prescribed information on pages 2, 3 and 4. of this LPA with the donor and that the attorney(s) cuss this LPA with the donor without anyone present; and
confirm and understand I confirm that I have read Parts A and B of thi I confirm that I have discussed the contents of was not present. I understand that I should make efforts to discussed this LPA with the done or	s LPA, and the prescribed information on pages 2, 3 and 4. of this LPA with the donor and that the attorney(s) cuss this LPA with the donor without anyone present; and or without anyone else present
confirm and understand I confirm that I have read Parts A and B of thi I confirm that I have discussed the contents of was not present. I understand that I should make efforts to discussed this LPA with the done.	s LPA, and the prescribed information on pages 2, 3 and 4. of this LPA with the donor and that the attorney(s) cuss this LPA with the donor without anyone present; and or without anyone else present
confirm and understand I confirm that I have read Parts A and B of thi I confirm that I have discussed the contents of was not present. I understand that I should make efforts to discussed this LPA with the done or	s LPA, and the prescribed information on pages 2, 3 and 4. of this LPA with the donor and that the attorney(s) cuss this LPA with the donor without anyone present; and or without anyone else present
confirm and understand I confirm that I have read Parts A and B of thi I confirm that I have discussed the contents of was not present. I understand that I should make efforts to discussed this LPA with the donce or I have discussed this LPA with the donce.	s LPA, and the prescribed information on pages 2, 3 and 4. of this LPA with the donor and that the attorney(s) cuss this LPA with the donor without anyone present; and or without anyone else present
confirm and understand I confirm that I have read Parts A and B of thi I confirm that I have discussed the contents of was not present. I understand that I should make efforts to discussed this LPA with the donce or I have discussed this LPA with the donce.	s LPA, and the prescribed information on pages 2, 3 and 4. of this LPA with the donor and that the attorney(s) cuss this LPA with the donor without anyone present; and or without anyone else present
confirm and understand I confirm that I have read Parts A and B of thi I confirm that I have discussed the contents of was not present. I understand that I should make efforts to discussed this LPA with the donce or I have discussed this LPA with the donce.	s LPA, and the prescribed information on pages 2, 3 and 4. of this LPA with the donor and that the attorney(s) cuss this LPA with the donor without anyone present; and or without anyone else present
confirm and understand I confirm that I have read Parts A and B of thi I confirm that I have discussed the contents of was not present. I understand that I should make efforts to discussed this LPA with the donce or I have discussed this LPA with the donce.	s LPA, and the prescribed information on pages 2, 3 and 4. of this LPA with the donor and that the attorney(s) cuss this LPA with the donor without anyone present; and or without anyone else present

certify	
I certify that in my opinion, at the time when the	e donor is making this LPA, that:
	is LPA and the scope of the authority under it;
	to induce the donor to create this LPA; and
there is nothing else that would prevent to	
Do not sign this certificate if you have any doubt a have to the attention of the OPG.	about any of the above. You should bring any concerns you
Signature of additional certificate provider	Date signed
	D D M M Y Y Y
Full name of additional certificate provider	

20. My contact det	ails and date of birth are:	
	Attorney	
	Mr. Mrs. Ms. Miss Other	San Note
First name		
riistriaille		
Middle name(s)		
	, L	
Last name		
Date of birth	D D M M Y Y Y	
Telephone no.	Mobile	
		(See Note
E-mail address		
30	the prescribed information on pages 2, 3 and 4 or have had the prescibed	ADDIT DESTROCTORPOSI
	read to me.	NIBIO DESCRIBERADA
31. I understand		
or I understand	d the duties imposed on me under this Lasting Power of Attorney including	CHARLEST CONTRACTOR
the obligation	on to act in accordance with the principles of the Mental Capacity Act 2005	Test Established
the obligation	on to act in accordance with the principles of the Mental Capacity Act 2005 by to have regard to the Code of Practice issued under the Act.	
the obligation	on to act in accordance with the principles of the Mental Capacity Act 2005	See Note
the obligation and the duty 32. I am not an 33. I understand	on to act in accordance with the principles of the Mental Capacity Act 2005 by to have regard to the Code of Practice issued under the Act. undischarged bankrupt or an interim bankrupt. d that I cannot act under this Lasting Power of Attorney until this form has	
the obligation and the duty and the duty 32. I am not an 33. I understand been registe	on to act in accordance with the principles of the Mental Capacity Act 2005 by to have regard to the Code of Practice issued under the Act. undischarged bankrupt or an interim bankrupt. d that I cannot act under this Lasting Power of Attorney until this form has ered by the Public Guardian.	See Note:
the obligation and the duty and the duty 32. I am not an 33. I understand been registe	on to act in accordance with the principles of the Mental Capacity Act 2005 by to have regard to the Code of Practice issued under the Act. undischarged bankrupt or an interim bankrupt. d that I cannot act under this Lasting Power of Attorney until this form has ered by the Public Guardian. as a deed (You must not sign until after the donor has signed at paragraph 14 and	
the obligation and the duty and the duty 32. I am not an 33. I understand been registe	on to act in accordance with the principles of the Mental Capacity Act 2005 by to have regard to the Code of Practice issued under the Act. undischarged bankrupt or an interim bankrupt. d that I cannot act under this Lasting Power of Attorney until this form has ered by the Public Guardian.	See Note:
the obligation and the duty and the duty 32. I am not an 33. I understand been registe	on to act in accordance with the principles of the Mental Capacity Act 2005 by to have regard to the Code of Practice issued under the Act. undischarged bankrupt or an interim bankrupt. d that I cannot act under this Lasting Power of Attorney until this form has ered by the Public Guardian. as a deed (You must not sign until after the donor has signed at paragraph 14 and	See Note:
the obligation and the duty and the duty and the duty are also and an are also and are also and are also and are also and are are also and are also are also and are also are also and are also and are also and are also and are also are also and are also also are also and are also also also are also and are also also are also also also are also also also are also also also also also also also also	on to act in accordance with the principles of the Mental Capacity Act 2005 by to have regard to the Code of Practice issued under the Act. undischarged bankrupt or an interim bankrupt. d that I cannot act under this Lasting Power of Attorney until this form has ered by the Public Guardian. as a deed (You must not sign until after the donor has signed at paragraph 14 and the certificate provider has signed the certificate)	See Note:
the obligation and the duty and the duty are also as a second and a second are also as a second are a second are a second are also as a second are also as a second are	on to act in accordance with the principles of the Mental Capacity Act 2005 by to have regard to the Code of Practice issued under the Act. undischarged bankrupt or an interim bankrupt. d that I cannot act under this Lasting Power of Attorney until this form has ered by the Public Guardian. as a deed (You must not sign until after the donor has signed at paragraph 14 and	See Note:
the obligation and the duty and the duty are in a second and and an are in a second and are in a second are in a second and a second are in a second and a second are in a sec	on to act in accordance with the principles of the Mental Capacity Act 2005 by to have regard to the Code of Practice issued under the Act. undischarged bankrupt or an interim bankrupt. d that I cannot act under this Lasting Power of Attorney until this form has ered by the Public Guardian. as a deed (You must not sign until after the donor has signed at paragraph 14 and the certificate provider has signed the certificate)	See Note:
the obligation and the duty and the duty and the duty are in the seen register. The seen register and seen and the seen register and seen and the seen register and the seen reg	on to act in accordance with the principles of the Mental Capacity Act 2005 by to have regard to the Code of Practice issued under the Act. undischarged bankrupt or an interim bankrupt. d that I cannot act under this Lasting Power of Attorney until this form has ered by the Public Guardian. as a deed (You must not sign until after the donor has signed at paragraph 14 and the certificate provider has signed the certificate)	See Note:
the obligation and the duty and the duty and the duty are in the presence the obligation and the duty and the presence the obligation and the presence the duty and the duty a	on to act in accordance with the principles of the Mental Capacity Act 2005 by to have regard to the Code of Practice issued under the Act. undischarged bankrupt or an interim bankrupt. d that I cannot act under this Lasting Power of Attorney until this form has ered by the Public Guardian. as a deed (You must not sign until after the donor has signed at paragraph 14 and the certificate provider has signed the certificate)	See Note:
the obligation and the duty and the duty and the duty are also as a deed) the obligation and the duty are also as a deed and and a deed are also as a deed are also are also as a deed are also a deed are also as a deed are also a deed are also as a deed are also as a deed are also as a deed are also also as a deed are also as a deed are also as a deed a	on to act in accordance with the principles of the Mental Capacity Act 2005 by to have regard to the Code of Practice issued under the Act. undischarged bankrupt or an interim bankrupt. d that I cannot act under this Lasting Power of Attorney until this form has ered by the Public Guardian. as a deed (You must not sign until after the donor has signed at paragraph 14 and the certificate provider has signed the certificate)	See Note:
the obligation and the duty and the duty and the duty are also as a deed as	on to act in accordance with the principles of the Mental Capacity Act 2005 by to have regard to the Code of Practice issued under the Act. undischarged bankrupt or an interim bankrupt. d that I cannot act under this Lasting Power of Attorney until this form has ered by the Public Guardian. as a deed (You must not sign until after the donor has signed at paragraph 14 and the certificate provider has signed the certificate)	See Note:
the obligation and the duty and the duty and the duty are in the presence as a deed) I the presence as a deed witness	on to act in accordance with the principles of the Mental Capacity Act 2005 by to have regard to the Code of Practice issued under the Act. undischarged bankrupt or an interim bankrupt. d that I cannot act under this Lasting Power of Attorney until this form has ered by the Public Guardian. as a deed (You must not sign until after the donor has signed at paragraph 14 and the certificate provider has signed the certificate)	See Note:
the obligation and the duty and the duty and the duty are in the presence of witness.	on to act in accordance with the principles of the Mental Capacity Act 2005 by to have regard to the Code of Practice issued under the Act. undischarged bankrupt or an interim bankrupt. d that I cannot act under this Lasting Power of Attorney until this form has ered by the Public Guardian. as a deed (You must not sign until after the donor has signed at paragraph 14 and the certificate provider has signed the certificate)	See Note:
the obligation and the duty and the duty and the duty are also as a deed as	on to act in accordance with the principles of the Mental Capacity Act 2005 by to have regard to the Code of Practice issued under the Act. undischarged bankrupt or an interim bankrupt. d that I cannot act under this Lasting Power of Attorney until this form has ered by the Public Guardian. as a deed (You must not sign until after the donor has signed at paragraph 14 and the certificate provider has signed the certificate)	See Note:
the obligation and the duty and the duty and the duty are also as a deed as	on to act in accordance with the principles of the Mental Capacity Act 2005 by to have regard to the Code of Practice issued under the Act. undischarged bankrupt or an interim bankrupt. d that I cannot act under this Lasting Power of Attorney until this form has ered by the Public Guardian. as a deed (You must not sign until after the donor has signed at paragraph 14 and the certificate provider has signed the certificate)	See Note:
the obligation and the duty and the duty and the duty are also as a deed as	on to act in accordance with the principles of the Mental Capacity Act 2005 by to have regard to the Code of Practice issued under the Act. undischarged bankrupt or an interim bankrupt. d that I cannot act under this Lasting Power of Attorney until this form has ered by the Public Guardian. as a deed (You must not sign until after the donor has signed at paragraph 14 and the certificate provider has signed the certificate)	See Note:
the obligation and the duty and the duty and the duty are also as a deed as	on to act in accordance with the principles of the Mental Capacity Act 2005 by to have regard to the Code of Practice issued under the Act. undischarged bankrupt or an interim bankrupt. d that I cannot act under this Lasting Power of Attorney until this form has ered by the Public Guardian. as a deed (You must not sign until after the donor has signed at paragraph 14 and the certificate provider has signed the certificate)	See Note:

20. Wy contact det	ails and	date	of bir	th are) :							
	Attorne	y										
	Mr.	. [_ M	rs.		۷s.	☐ Mis	s [Othe	er	<	
First name	L											
1.4° d.11												
Middle name(s)												
Last name												
Lastrianie												
Date of birth	D D	Тм	м	ΥY	Y	Y						
Date 0, 2		1	···		1.							
Telephone no.								Mobile				
										_	(ISES NAVE
E-mail address												and turnamentari
30. □ I have read			al 1 a.e.				. 2 2	al 4 a a la				ning entropication
30. I have read information			a inte	ormai	ion oi	1 pages	sz, san	a 4 or r	iave n	ad the presci	ped (H Leerland
31. UI understan	d the du	ities in	npos	ed or	me u	ınder th	nis Lastir	ng Pow	er of A	ttorney includ	ling 🤇	See Note:
the obligation	on to act	t in ac	cord	ance	with t	he princ	ciples of	the Me	ntal C	ttorney includance apacity Act 2	ding < 005	See Note
the obligation	on to act y to hav	t in ac e rega	cord ard to	ance the	with t	ne princ of Prac	ciples of tice issu	the Me led und	ntal C	apacity Act 2	ding <	El Son Notes
the obligation and the duty 32. I am not an	on to act y to hav undisch	t in ac e rega nargeo	cord ard to d ban	ance the (krupt	with to Code or an	ne prind of Prac interim	ciples of tice issu n bankru	the Me led und pt.	ntal C er the	apacity Act 2 Act.	005	See Note
the obligation and the dute and the dute and the and	on to act y to hav undisch d that I	t in ac e rega nargeo canno	cord ard to d ban t act	ance the (krupt unde	with to Code or an or this	ne prind of Prac interim	ciples of tice issu n bankru	the Me led und pt.	ntal C er the	apacity Act 2 Act.	005	See Note
the obligation and the duture and the duture and the second and an area and area	on to act y to hav undisch d that I d ered by	t in ac e rega narged canno the Pi	cord ard to d ban t act ublic	ance the o krupt unde Guar	with to Code or an or this dian.	ne prind of Prace interim	ciples of ctice issu n bankru n Power	the Me ued und upt. of Attor	ntal C er the ney ur	apacity Act 2 Act. htil this form h	005 < as <	See Note
the obligation and the dute and the dute and the and	on to act y to hav undisch d that I d ered by	t in ac e rega narged canno the Po	cord ard to d ban at act ublic u mus	ance the (krupt unde Guar	with to Code or and this dian. Sign u	ne prind of Pract interim Lasting	ciples of ctice issu n bankru n Power	the Me led und lpt. of Attor	ntal C er the ney ur	apacity Act 2 Act. htil this form h	005 < as <	See Note
the obligation and the duture and the duture and the second and an an an	on to act y to hav undisch d that I d ered by	t in ac e rega narged canno the Po	cord ard to d ban at act ublic u mus	ance the (krupt unde Guar	with to Code or and this dian. Sign u	ne prind of Pract interim Lasting	ciples of citice issum the bankruing Power of the done	the Me led und lpt. of Attor	ntal C er the ney ur	apacity Act 2 Act. htil this form h	005 < as <	See Note See Note See Note
the obligation and the duture and the duture and the second and an an an	on to act y to hav undisch d that I d ered by	t in ac e rega narged canno the Po	cord ard to d ban at act ublic u mus	ance the (krupt unde Guar	with to Code or and this dian. Sign u	ne prind of Pract interim Lasting	ciples of citice issum the bankruing Power of the done	the Me led und lpt. of Attor	ntal C er the ney ur	apacity Act 2 Act. htil this form h	005 < as <	See Note
the obligation and the duture and the duture and the second and and and and and and and and and a	on to act y to hav undisch d that I d ered by	t in ac e rega narged canno the Po the	cord ard to d ban at act ublic u mus	ance the (krupt unde Guar st not ficate	with to Code or and this dian. Sign u	ne princ of Prace interim Lasting ntil after er has s	ciples of citice issum the bankruing Power of the done	the Me led und lpt. of Attor	ntal C er the ney ur	apacity Act 2 Act. htil this form h	005 < as <	See Note See Note See Note
the obligation and the duture and the duture and the second and and and and and and and and and a	on to act y to hav undisch d that I dered by as a dee	t in ac e rega narged canno the Po the	cord ard to d ban at act ublic u mus certif	ance the (krupt unde Guar st not ficate	with the Code or an or a	ne princ of Prace interim Lasting ntil after er has s	ciples of citice issum the bankruing Power of the done	the Me led und lpt. of Attor	ntal C er the ney ur	apacity Act 2 Act. htil this form h	005 < as <	See Note See Note See Note
the obligation and the duture and the duture and the duture are also and the duture and the dutu	on to act y to hav undisch d that I dered by as a dee	t in ac e rega narged canno the Po the	cord ard to d ban at act ublic u mus certif	ance the (krupt unde Guar st not ficate	with the Code or an or a	ne princ of Prace interim Lasting ntil after er has s	ciples of citice issum the bankruing Power of the done	the Me led und lpt. of Attor	ntal C er the ney ur	apacity Act 2 Act. htil this form h	005 < as <	See Note See Note See Note
the obligation and the duture and the duture and the duture are as a large and the duture are as a deed) I the presence as a deed as a descence as a signature of	on to act y to hav undisch d that I dered by as a dee	t in ac e rega narged canno the Po the	cord ard to d ban at act ublic u mus certif	ance the (krupt unde Guar st not ficate	with the Code or an or a	ne princ of Prace interim Lasting ntil after er has s	ciples of citice issum the bankruing Power of the done	the Me led und lpt. of Attor	ntal C er the ney ur	apacity Act 2 Act. htil this form h	005 < as <	See Note See Note See Note
the obligation and the duture and the duture and the duture are as a large and the duture are as a deed) I the presence	on to act y to hav undisch d that I dered by as a dee	t in ac e rega narged canno the Po the	cord ard to d ban at act ublic u mus certif	ance the (krupt unde Guar st not ficate	with the Code or an or a	ne princ of Prace interim Lasting ntil after er has s	ciples of citice issum the bankruing Power of the done	the Me led und lpt. of Attor	ntal C er the ney ur	apacity Act 2 Act. htil this form h	005 < as <	See Note See Note See Note
the obligation and the duture and the duture and the duture are as a large and the duture are as a deed) I am not an are as a deed) I am not an are as a deed) In the presence are as a deed witness	on to act y to hav undisch d that I dered by as a dee	t in ac e rega narged canno the Po the	cord ard to d ban at act ublic u mus certif	ance the (krupt unde Guar st not ficate	with the Code or an or a	ne princ of Prace interim Lasting ntil after er has s	ciples of citice issum the bankruing Power of the done	the Me led und lpt. of Attor	ntal C er the ney ur	apacity Act 2 Act. htil this form h	005 < as <	See Note See Note See Note
the obligation and the duture and the duture and the duture are as a deed) I am not an	on to act y to hav undisch d that I dered by as a dee	t in ac e rega narged canno the Po the	cord ard to d ban at act ublic u mus certif	ance the (krupt unde Guar st not ficate	with the Code or an or a	ne princ of Prace interim Lasting ntil after er has s	ciples of citice issum the bankruing Power of the done	the Me led und lpt. of Attor	ntal C er the ney ur	apacity Act 2 Act. htil this form h	005 < as <	See Note See Note See Note
the obligation and the duture and the duture and the duture are as a deed. 33. I understand been register as a deed. 34. Signed by me and as a deed. 35. Date signed (delivered as a deed). 36. Signature of witness. 37. Full name of witness.	on to act y to hav undisch d that I dered by as a dee	t in ac e rega narged canno the Po the	cord ard to d ban at act ublic u mus certif	ance the (krupt unde Guar st not ficate	with the Code or an or a	ne princ of Prace interim Lasting ntil after er has s	ciples of citice issum the bankruing Power of the done	the Me led und lpt. of Attor	ntal C er the ney ur	apacity Act 2 Act. htil this form h	005 < as <	See Note
the obligation and the duture and the duture and the duture are as a large and the duture are as a deed). In the presence 36. Signature of witness 37. Full name	on to act y to hav undisch d that I dered by as a dee	t in ac e rega narged canno the Po the	cord ard to d ban at act ublic u mus certif	ance the (krupt unde Guar st not ficate	with the Code or an or a	ne princ of Prace interim Lasting ntil after er has s	ciples of citice issum the bankruing Power of the done	the Me led und lpt. of Attor	ntal C er the ney ur	apacity Act 2 Act. htil this form h	005 < as <	See Note
the obligation and the duture and the duture and the duture are as a deed. 33. I understand been registered. 34. Signed by medical states and the deed. 35. Date signed (delivered as a deed). 36. Signature of witness. 37. Full name of witness. 38. Address of	on to act y to hav undisch d that I dered by as a dee	t in ac e rega narged canno the Po the	cord ard to d ban at act ublic u mus certif	ance the (krupt unde Guar st not ficate	with the Code or an or a	ne princ of Prace interim Lasting ntil after er has s	ciples of citice issum the bankruing Power of the done	the Me led und lpt. of Attor	ntal C er the ney ur	apacity Act 2 Act. htil this form h	005 < as <	See Note
the obligation and the duture and the duture and the duture are as a deed. 33. I understand been registered. 34. Signed by medical states and the deed. 35. Date signed (delivered as a deed). 36. Signature of witness. 37. Full name of witness. 38. Address of	on to act y to hav undisch d that I dered by as a dee	t in ac e rega narged canno the Po the	cord ard to d ban at act ublic u mus certif	ance the (krupt unde Guar st not ficate	with the Code or an or a	ne princ of Prace interim Lasting ntil after er has s	ciples of citice issum the bankruing Power of the done	the Me led und lpt. of Attor	ntal C er the ney ur	apacity Act 2 Act. htil this form h	005 < as <	See Note
the obligation and the duture and the duture and the duture are as a deed. 33. I understand been registered. 34. Signed by medical states and the deed. 35. Date signed (delivered as a deed). 36. Signature of witness. 37. Full name of witness. 38. Address of	on to act y to hav undisch d that I dered by as a dee	t in ac e rega narged canno the Po the	M	ance the (krupt unde Guar st not ficate	with ti Code or ar r this dian. sign u	ne princ of Prace interim Lasting ntil after er has s	ciples of citice issum the bankruing Power of the done	the Me led und lpt. of Attor	ntal C er the ney ur	apacity Act 2 Act. htil this form h	005 < as <	See Note:

(This section only	needs to be o	completed whe	re the dor	nor has ci	nosen a t	rust co	rporation to	be an attorney)
49. Name and ad	dress of a trus	t corporation						See Note
	A trust corpo	oration						
Company name							Company	seal (if applicable)
Address								
		Postcode						
Company Re	gistration no.							
information	read to me.		on pages	2, 3 and	4 or had	the pre	scribed	(D) ISRBNOW
51. I understar obligation the duty to	nd the duties in to act in accor have regard t	mposed on me dance with the to the Code of	under thi principles Practice is	s Lasting s of the M ssued und	Power of ental Ca der the A	f Attorn pacity / ct.	ey includin Act 2005 ar	
51. understar	nd the duties in to act in accor have regard to the executed	mposed on me dance with the to the Code of d until after the	under thi principles Practice is donor has	s Lasting s of the M ssued und	Power of ental Ca der the A	f Attorn pacity / ct.	ey includin Act 2005 ar	
51. I understar obligation the duty to	nd the duties in to act in accor have regard to the executed	mposed on me dance with the to the Code of d until after the	under thi principles Practice is donor has	s Lasting s of the M ssued und	Power of ental Ca der the A	f Attorn pacity / ct.	ey includin Act 2005 ar	
51. I understar obligation the duty to	nd the duties in to act in accor have regard to the executed	mposed on me dance with the to the Code of d until after the	under thi principles Practice is donor has	s Lasting s of the M ssued und	Power of ental Ca der the A	f Attorn pacity / ct.	ey includin Act 2005 ar	
51. I understar obligation the duty to	nd the duties in to act in accor have regard to the executed	mposed on me dance with the to the Code of d until after the	under thi principles Practice is donor has	s Lasting s of the M ssued und	Power of ental Ca der the A	f Attorn pacity / ct.	ey includin Act 2005 ar	
51. I understar obligation the duty to	nd the duties in to act in accor have regard to the executed	mposed on me dance with the to the Code of d until after the	under thi principles Practice is donor has	s Lasting s of the M ssued und	Power of ental Ca der the A	f Attorn pacity / ct.	ey includin Act 2005 ar	
51. I understar obligation the duty to	nd the duties in to act in accor have regard to the executed	mposed on me dance with the to the Code of d until after the	under thi principles Practice is donor has	s Lasting s of the M ssued und	Power of ental Ca der the A	f Attorn pacity / ct.	ey includin Act 2005 ar	
51. I understar obligation the duty to	nd the duties in to act in accor have regard to the executed	mposed on me dance with the to the Code of d until after the	under thi principles Practice is donor has	s Lasting s of the M ssued und	Power of ental Ca der the A	f Attorn pacity / ct.	ey includin Act 2005 ar	
51. I understar obligation the duty to	nd the duties in to act in accor have regard to the executed	mposed on me dance with the to the Code of d until after the	under thi principles Practice is donor has	s Lasting s of the M ssued und	Power of ental Ca der the A	f Attorn pacity / ct.	ey includin Act 2005 ar	

	placement Attorney's stateme		See Note 5
	by a replacement attorney if appointed. (ney chosen at paragraph 5.)	Only complete this if you are a	
52. My contact de	ails and date of birth are:		
	Attorney		
	☐ Mr. ☐ Mrs. ☐ Ms.	Miss Other	Set Nove
First name			
Middle name(s)		
Last name			
5			
Date of birth	D D M M Y Y Y Y		
Telephone no		Mobile	
E-mail addres	5		Cold thatainninna
information	the prescribed information on pages 2, read to me.		Name formation or an artist of the second
information 54.		ent is terminated I will replace the	Name formation or an artist of the second
information 54. I understar original atte	read to me. d that if an original attorney's appointme	ent is terminated I will replace the rney.	
information 54. I understar original attes 55. I understar relevant at the obligation	read to me. d that if an original attorney's appointment or an attorney if I am still eligible to act as an attorney if I do not have the authority to act uses the authority to act uses I do not have the authority to act uses I do not have the authority to act uses I do not have the authority to act uses I do not have the authority to act uses I do not have the authority to act uses I do not have the authority to act uses I do not have the authority to act uses I do not have I do not ha	ent is terminated I will replace the imey. under this LPA until such time as asting Power of Attorney includir es of the Mental Capacity Act 200	See Note 5 a See Note 5
information 54. I understar original atte 55. I understar relevant at 56. I understar the obligation and the du	read to me. d that if an original attorney's appointment or ney if I am still eligible to act as an attorney if I am still eligible to act as an attorney's appointment is terminated. d the duties imposed on me under this Lead to act in accordance with the principle	ent is terminated I will replace the imey. under this LPA until such time as asting Power of Attorney includir es of the Mental Capacity Act 200 e issued under the Act.	a See Note 5
information 54. I understar original atte 55. I understar relevant at the obligate and the du the first the fi	read to me. If that if an original attorney's appointment or any if I am still eligible to act as an attorney if I am still eligible to act as an attorney's appointment is terminated. If the duties imposed on me under this Lead to act in accordance with the principle by to have regard to the Code of Practice.	ent is terminated I will replace the rney. under this LPA until such time as asting Power of Attorney includir as of the Mental Capacity Act 200 assued under the Act.	a See Notes See Notes See Notes See Notes
information 54. I understar original attributes 55. I understar relevant at the obligation and the du 57. I am not ar been regis	read to me. d that if an original attorney's appointment or	ent is terminated I will replace the imey. under this LPA until such time as Lasting Power of Attorney includir es of the Mental Capacity Act 200 e issued under the Act. unkrupt. wer of Attorney until this form has e donor has signed at paragraph 14 a	See Note 5 See Note 5 See Note 6 See Note 6
information 54. I understar original attributes 55. I understar relevant at the obligation and the du 57. I am not ar been regis	read to me. If that if an original attorney's appointment orney if I am still eligible to act as an attorney if I am still eligible to act as an attorney's appointment is terminated. If the duties imposed on me under this Learney to act in accordance with the principle by to have regard to the Code of Practice undischarged bankrupt or an interim bated that I cannot act under this Lasting Poered by the Public Guardian. If the duties imposed on me under this bated to the Code of Practice undischarged bankrupt or an interim bated that I cannot act under this Lasting Poered by the Public Guardian.	ent is terminated I will replace the imey. under this LPA until such time as Lasting Power of Attorney includir es of the Mental Capacity Act 200 e issued under the Act. unkrupt. wer of Attorney until this form has e donor has signed at paragraph 14 a	See Note 5 See Note 5 See Note 6 See Note 6
information 54. I understar original attributes 55. I understar relevant at the obligation and the du 57. I am not ar been regis	read to me. If that if an original attorney's appointment orney if I am still eligible to act as an attorney if I am still eligible to act as an attorney's appointment is terminated. If the duties imposed on me under this Learney to act in accordance with the principle by to have regard to the Code of Practice undischarged bankrupt or an interim bated that I cannot act under this Lasting Poered by the Public Guardian. If the duties imposed on me under this bated to the Code of Practice undischarged bankrupt or an interim bated that I cannot act under this Lasting Poered by the Public Guardian.	ent is terminated I will replace the imey. under this LPA until such time as Lasting Power of Attorney includir es of the Mental Capacity Act 200 e issued under the Act. unkrupt. wer of Attorney until this form has e donor has signed at paragraph 14 a	See Note 5 See Note 5 See Note 6 See Note 6
information 54. I understar original attributes 55. I understar relevant at the obligation and the du the	read to me. In that if an original attorney's appointment orney if I am still eligible to act as an attorney if I am still eligible to act as an attorney if I am still eligible to act as an attorney's appointment is terminated. In the duties imposed on me under this Longer to act in accordance with the principle by to have regard to the Code of Practice undischarged bankrupt or an interim bated that I cannot act under this Lasting Poered by the Public Guardian. In the certificate provider has signed.	ent is terminated I will replace the imey. under this LPA until such time as a sating Power of Attorney includir as of the Mental Capacity Act 200 issued under the Act. unkrupt. wer of Attorney until this form has a donor has signed at paragraph 14 and the certificate).	See Note 5 See Note 5 See Note 6 See Note 6

In the presence	of							
61. Signature of witness								<
62. Full name of witness								
63. Address of witness								
		Postcode						
	Important -	This form car	not be use	ed until it h	as been	registere	d by	
	the Office	e of the Public	Guardian	and stamp	ed on e v	very page	!.	

Part 2: Form for instrument intended to create a personal welfare Lasting Power of Attorney

LPA PW 10.07

Lasting Power of Attorney Personal Welfare

R 8 2 2 2 2 2 2 5 5 8 8 2 2 2 2 2 2 5 5 6 8 2 2 2 2 2 2 2 5 5 6 8 2 2 2 2 2 2 2 5 5 6 8 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
For official use only
Date of registration

This is a Lasting Power of Attorney (LPA). It allows you (the donor) to choose someone (the attorney) to make decisions on your behalf where you lack capacity to make those decisions yourself. Your attorney(s) can only use the completed LPA after it has been registered with the Office of the Public Guardian (OPG).

Getting started

Before you complete this LPA you **must** read the prescribed information on the next three pages so that you understand the purpose and legal consequences of making an LPA. You should refer to the separate notes on how to complete this LPA when you are directed to because they will help you to complete it.

Things you will need to do to complete this LPA

- decide who to appoint as your attorney(s) in the LPA
- decide if you want to appoint a replacement attorney in case your attorney(s) cannot act for you
- decide whether you want anyone to be notified when an application is made to register your LPA and, if you do, who you want to be notified
- choose at least one independent person to provide a certificate at Part B of the LPA
- fill in part A of the LPA. Your certificate provider(s) will need to complete Part B. Your attorney(s) will need to complete Part C
- have a witness to your signature at the end of Part A of the LPA

What to do after completing this LPA

An LPA can only be used after it has been registered with the OPG, so you will need to think about when you want it to be registered. There is a fee to register an LPA. Further information about how to register an LPA and what happens following registration is available from the OPG.

Information for you, your attorney(s) and your certificate provider(s) is available from the OPG. If you have any questions about how to complete this LPA please contact the OPG.

Office of the Public Guardian
Archway Tower
London N19 5SZ
0845 330 2900
www.publicguardian.gov.uk

OPG STAMP

Important - This form **cannot** be used until it has been registered by the Office of the Public Guardian and stamped on **every** page.

© Crown copyright 2007

PRESCRIBED INFORMATION

You must read this information carefully to understand the purpose and legal consequences of making an LPA. You must ask your attorney(s) and certificate provider(s) to read it too.

This form is a legal document known as a Lasting Power of Attorney (LPA). It allows you to authorise someone (the attorney(s)) to make decisions on your behalf about your personal welfare including your healthcare, if you lack capacity to make those decisions. Your attorney(s) can only use the LPA after it is registered with the OPG.

If you want someone to make decisions about your property and affairs then you need a different form. You can get a Lasting Power of Attorney — Property and Affairs from the OPG and legal stationers

Detailed information about why you might find an LPA useful is in the 'Guide for people who want to make a personal welfare LPA'. You can get this from the OPG. You should read this guide before completing this LPA. You should ask your attorney(s) and certificate provider(s) to read it too.

Your attorney(s) cannot do whatever they like. They **must** follow the principles of the Mental Capacity Act 2005 which are:

- a person must be assumed to have capacity unless it is established that the person lacks capacity;
- a person is not to be treated as unable to make a decision unless all practicable steps to help the person to do so have been taken without success;
- a person is not to be treated as unable to make a decision merely because the person makes an unwise decision:
- an act done, or decision made, under the Mental Capacity Act for or on behalf of a person who lacks capacity must be done, or made, in the person's best interests; and
- before the act is done, or the decision is made, regard must be had to whether the purpose for which it is needed can be as effectively achieved in a way that is less restrictive of the person's rights and freedom of action.

Guidance about the principles is in the Mental Capacity Act 2005 Code of Practice. Your attorney(s) will have a duty to have regard to the Code. Copies of the Code can be obtained from Her Majesty's Stationary Office.

- CHOOSING YOUR ATTORNEY Your attorney should be a person you know and trust who is at least 18. You can choose more than one attorney.
- CHOOSING MORE THAN ONE ATTORNEY If you choose more than one attorney you must decide whether your attorneys should act together or together and independently (that is they can all act together but they can also act separately if they wish).

You may appoint your attorneys together in respect of some matters and together and independently in respect of others. If you appoint more than one attorney and do not state whether they are appointed together or together and independently, when your LPA is registered they will be treated on the basis that they are appointed together. In this LPA form, 'together' means jointly and 'together and independently' means jointly and severally for the purposes of the Mental Capacity Act 2005.

Please do not detach these notes. They are part of the Lasting Power of Attorney.

2

PRESCRIBED INFORMATION

- CHOOSING A REPLACEMENT ATTORNEY You can name a replacement(s) in case an
 attorney is unable to or no longer wishes to continue acting for you. Your attorney(s) can change
 their mind and may not want to act for you. If this is the case, they must tell you and the OPG.
- 4. WHEN AN ATTORNEY CAN ACT An attorney for personal welfare can only act when you lack the capacity to make a particular decision yourself. There is no one point at which you are treated as having lost capacity to make decisions about your personal welfare. You may have capacity to make some decisions but not others; for example, you may be able to decide what to wear but not to consent to an operation. Your attorney(s) must help you to make as many of your own decisions as you can. When decisions have to be taken for you, your attorney(s) must always act in your best interests.
- 5. DECISIONS YOUR ATTORNEY CAN MAKE FOR YOU An attorney for personal welfare may make any decision that you could make about your welfare e.g. where you live and with whom, accessing your personal information like medical records, deciding what you wear, what you eat and how you spend your day. This is subject to the authority you give them and any decisions excluded by the Mental Capacity Act 2005. They will also be able to give and refuse consent to medical treatment according to your best interests. Your attorney(s) will only be able to make these decisions where you lack capacity to make them yourself. Some decisions will also involve property and affairs, such as a move to residential care. Your personal welfare attorney(s) will then need to consider your best interests with your attorney(s) for property and affairs (if you have one).
- 6. LIFE-SUSTAINING TREATMENT Your attorney(s) cannot make decisions about life-sustaining treatment for you unless you expressly state that in your LPA. Life-sustaining treatment means any treatment that a doctor considers necessary to sustain your life. Life-sustaining treatment is not a category of treatment. Whether or not a treatment is life-sustaining will depend on the circumstances of a particular situation. Some treatments will be life-sustaining in some situations but not in others; the important factor is if the treatment is needed to keep you alive. In the LPA you must specify whether you are giving your attorney(s) this power.
- 7. If you do not say that your attorney(s) can make decisions about life-sustaining treatment, the doctor in charge of your treatment will make the decision in your best interests. Where practicable and appropriate, your doctor will take into account the views of your attorney(s) and other people interested in your welfare as part of the best interests assessment. This is what happens in all cases where there is nobody authorised to take decisions on your behalf. However, if you have a separate valid and applicable advance decision, that should be followed by the doctor.
- 8. RESTRICTING THE POWERS OF YOUR ATTORNEY(S) OR ADDING CONDITIONS You can put legally binding restrictions and conditions on your attorney(s)' powers and the scope of their authority in the LPA. But these decisions may still need to be made and other people will have to decide for you. That could involve going back to your doctor or care worker or the Court of Protection and a decision being made in your best interests.
- GIVING GUIDANCE TO YOUR ATTORNEY You can also give guidance to your attorney(s) in your LPA. This is not legally binding but should be taken into account when they are making decisions for you.

Please do not detach these notes. They are part of the Lasting Power of Attorney.

PRESCRIBED INFORMATION

- 10. PAYING ATTORNEYS An attorney is entitled to be reimbursed for out-of-pocket expenses incurred in carrying out their duties. Professional attorneys, such as solicitors or accountants, charge for their services. You should discuss and record any decision you make about paying your attorney(s) in the LPA.
- 11. NOTIFYING OTHER PEOPLE BEFORE REGISTRATION You can name up to five people to be notified when an application to register your LPA is made. Anyone about to apply for registration of an LPA must notify these people. This gives you an important safeguard because if you lack capacity at the time of registration you will be relying on these people to raise any concerns they may have about the application to register. If you choose not to name anyone to be notified you will need to have two certificate providers under Part B of this form.
- 12. CERTIFICATE TO CONFIRM UNDERSTANDING Once you have filled in Part A of this form an independent person must fill in the certificate at Part B to confirm that, in their opinion, you are making the LPA of your own free will, and that you understand its purpose and the powers you are giving your attorney(s). This is an important safeguard and your LPA cannot be registered unless the certificate is completed.
- 13. REGISTERING THE LPA Your LPA cannot be used until it has been registered with the OPG. Either you or your chosen attorney(s) can apply to register the LPA. If you register it immediately it is ready to be used when you lack capacity. The form for registering the LPA is available from the OPG together with details of the registration fee.
- 14. REGISTER OF LPAs There is a register of LPAs kept by the OPG. It is possible to access the register of LPAs but access is controlled. On application to the OPG, and payment of a fee, people can find out basic information about your LPA. At the discretion of the OPG and according to the purpose for which they need it, they may be able to find out further information. There is additional guidance available from the OPG on the register.
- 15. CHANGING YOUR MIND You can cancel your LPA even after it is registered if you have the mental capacity to do so. You need to take formal steps to revoke the LPA. You must tell your attorney if you do and, if it is registered, you will need to ask the OPG to remove it from the register of LPAs.

FURTHER NOTICE FOR ATTORNEY(S)

You should read the 'Guide for people taking on the role of Personal Welfare attorney' under an LPA before you agree to become an attorney and complete Part C of this LPA. The guide contains detailed information about what your role and responsibilities will be.

You must contact the OPG at once if the person you are acting for dies. If you are unable to continue acting you should take steps to disclaim the power and notify the OPG and the donor.

FURTHER NOTICE FOR CERTIFICATE PROVIDER(S)

You should read the separate 'Certificate Providers and witness guidance' before you agree to become a certificate provider and complete Part B of this LPA. The guidance contains detailed information about your role and responsibilities. You may also like to read the guidance for personal welfare attorneys and donors. If you have any concerns about an LPA you are asked to certify please contact the OPG.

Please do not detach these notes. They are part of the Lasting Power of Attorney.

4

	nnot be used unti	l it has beer	n registe	red by	the OF	G ar	nd stamped or	every page.
Before you compleshould read the gr				prescril	oed inf	orma	ation on pages	2, 3 and 4 and you
To help you comp	lete the form, plea	ase refer to	the Note	es for co	omplet	ing a	ın LPA – Perso	onal Welfare.
PART A – D	onor's state	ement						
Your details								
1. My name and o	late of birth are:							See Note 1
	☐ Mr. ☐ N	1rs. 🔲	Ms.	Mis Mis	s [Ot	ther	
First name				2000000000	22000000	13/3/3/3/3/3/3/3/3/3/3/3/3/3/3/3/3/3/3/		
Middle name(s		9000000 H 9000000 9000000 H 9000000 900000 H 900000		100 00 00 00 00 00 00 00 00 00 00 00 00	350000000 330000000 33000000	3300000 3300000 3300000		
Wildale Harrie(5)			RENDOUGERS KNYDDOGGEN KNYDDOGGEN KNYDDOGGEN		22000000 22000000 22000000000000000000	13330000 13330000 13330000		
Last name			KURRERESE	XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	22000000	(333555	WARRASSOUR WARRASSOUR WARRASSOUR WARRASSOUR WARRASSOUR	
Date of birth	D D M M	YYY	Υ					
Any other nam (e.g. maiden n	es you are knowr ame)	n by or have	e been k	nown b	y in the	e pas	st	See Note 2
2. My contact deta	ails are:							See Note 3
A ddana				occursono.		LO COLONIA S		
Address		ostcode	000000000000000000000000000000000000000	22222555	5500 CCCCC	200000		
Address	F	COLOGGE						
Telephone no.	F	00.0000		055 8 8 8 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9				
	F							

	ity Act 2005:		ccordance v	vith the provis	sions of the	See Note
	Attorney Mr.	☐ Mrs.	☐ Ms.	☐ Miss	Other	See Note
First name(s)		\$551022213550022	200000000000000000000000000000000000000	2223556622235566	R2000 CCR R230 CCCR R320 CCCR R320 CCCR R320 CCCR R320 CCCR R320 CCC R320 C	
Last name		************			ASSISTED OF THE PROPERTY OF TH	
	Attorney Mr.	☐ Mrs.	☐ Ms.	☐ Miss	Other	
First name(s)	##200000000000000000000000000000000000		2006011300000011	200000000000000000000000000000000000000	N 2000 C C K X X 200 C C C K X 200 C C C C K X 200 C C C C C C C C C C C C C C C C C C	
Last name		CERRISON DECEMBES	50 60 R R R R S S S S 6 6 7 R R R R			
□to	gether in res	33000000000000000000000000000000000000	ie matters a		and independently in	
details are as				55555211955312	955 68 722 17 55 11 720 10 7 57 10 7 58 10 7 58 10 7 58 10 7 58 10 7 58 10 7 58 10 7 58 10 7 58 10 7 58 10 7 5	
7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7						
1						

First name(s) Last name	I wish to appoin	t a replacement attorney: (You do not have to appoint a replacement attorne	y). See Note
Mr. Mrs. Ms. Other First name(s) Last name Restrictions on the appointment of a replacement attorney: (If you do not complete this			
First name(s) Last name Restrictions on the appointment of a replacement attorney: (If you do not complete this	If Yes, I appoint	the following replacement attorney:	
Last name Restrictions on the appointment of a replacement attorney: (If you do not complete this		☐ Mr. ☐ Mrs. ☐ Ms. ☐ Miss ☐ Other	See Note
Restrictions on the appointment of a replacement attorney: (If you do not complete this	First name(s)		
Restrictions on the appointment of a replacement attorney: (If you do not complete this section your first replacement will replace the first attorney who needs replacing).	Last name		
	Restrictions on section your firs	the appointment of a replacement attorney: (If you do not complete this st replacement will replace the first attorney who needs replacing).	See Note 1
	section your firs	st replacement will replace the first attorney who needs replacing).	

3. You must choose o n	e of the two options below:	If you cannot sign or make a mark, please read the notes for completion.	See Note 1
Option A			
	torney(s) authority to give or rehalf	efuse consent to life-sustaining	
Your signature	20 5 5 4 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2		
Date signed	D D M M Y Y	YY	
Option B			
		give or refuse consent to life-sustaining	
Your signature			
Date signed	D D M M Y Y	Y Y	
Date signed	D D M M Y Y	YY	
Date signed	D D M M Y Y	YY	See Note 1
	D D M M Y Y	Y Y	See Note 1
n the presence of Signature of	D D M M Y Y	YY	See Note 1
In the presence of Signature of witness Full name	D D M M Y Y	Y Y)	See Note 1
In the presence of Signature of witness Full name of witness Address of		Y Y	See Note 1
In the presence of Signature of witness Full name of witness Address of	D D M M Y Y	YYY	See Note 1:
In the presence of Signature of witness Full name of witness Address of		Y Y)	See Note 1
In the presence of Signature of witness Full name of witness Address of		Y Y	See Note 1:
In the presence of Signature of witness Full name of witness Address of		Y Y Y	See Note 1
In the presence of Signature of witness Full name of witness Address of		Y Y	See Note 1

7. I wish to place restrictions and/or conditions on my attorney(s) in relation to my personal welfare:	See Note 1
If Yes, the restrictions and conditions are as follows:	
OCK OCK	

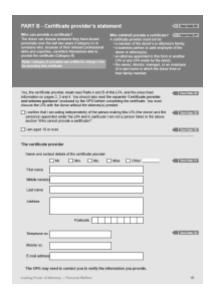
	ur attorney(s) should consider the guidance set out below when making decisions in your best interes	
5.	wish my attorney(s) to consider the following guidance:	2110131118
000 000 000		
223		
001		
001		
220		
200		
550 560 660		
200		
223		
000		
220 220 230 230 230		
001		
223		
223 223 223 253		
200		
553		
669		
001 001 001		
9. 1		ee Note
	I have agreed to pay my attorney(s) a fee to act as my attorney(s): Yes No If Yes, the following is additional information about fees that I have agreed with my attorney(s):	ee Note
	☐Yes ☐No	e Note
	☐Yes ☐No	e Note
	☐Yes ☐No	ee Note
	☐Yes ☐No	ee Note
	☐Yes ☐No	ee Note
	☐Yes ☐No	ee Note
	☐Yes ☐No	ee Note
	☐Yes ☐No	ee Note
	☐Yes ☐No	e Note
	☐Yes ☐No	e Note
	☐Yes ☐No	e Note
	☐Yes ☐No	e Note
	☐Yes ☐No	e Note
	☐Yes ☐No	e Note
	☐Yes ☐No	e Note

sh the following	people, tri	e named per	sons, to be	notified when	an appli	cation	to regi	ster my LPA
	☐ Mr.	Mrs.	☐ Ms.	Miss	□ Ot	her _	20055882222 CKN20000CK	1123 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
Full name	H H H H H H H H H H H H H H H H H H H		300000ERR330000EE		KARRODO CEKA KARRODO CEKA	133000CC	CHRRODODEKH CHRRODODEKH	######################################
Address	######################################			RAPODO CERAPO O CER RAPODO CERAPO O CER BUCCRROSSIJEZRARS		12300000 12300000 123000000		######################################
Address								EN 23 000 EV EN EN 23 000 EV EN EN 25 000 EV EN 23 00 EN 25 EN 23 00 EN 25 EN 25 EN 25 00 EN 25 EN 25 E
					KKKKO DI COKKI	12271133	000000000	RRRSSSSCREEN ENDSSCREEN ENDSSCREEN ENDSSCREEN ENDSSCREEN ENDSSCREEN ENDSCREEN ENDSCREEN ENDSCREEN ENDSCREEN ENDSCREEN ENDSCREEN ENDSCREEN ENDSCREEN ENDSCREEN
			Postco	de l	0.000000000000000000000000000000000000	100000000000000000000000000000000000000	00000000000000000000000000000000000000	RRSS 000 RR RRSS 000 RR RRSS 000 RR RSS 000 RRSS 000 RSS 000 RRSS 000 RSS 000 RRSS 000
Telephone no.		WWW.NOOOCKWWN.NOOOC		K H H H H H H H H H H H H H H H H H H H				
E-mail address	s			KAR2000 SKKAR2000 SK				13300000 RR3000 10000 RR3000 10000 RR3000 10000 RR30000 RR30000 10000 RR30000 RR30000 RR30000 RR30000 RR30000 RR3000
			V0000000000000000000000000000000000000			(2000000 (2000000 (200000) (200000)		
	☐ Mr.	☐ Mrs.	☐ Ms.	Miss	Ot	her _	5682223555 2955558222 2955588222	0022 H1953 50022 R1 50022 R255 55 30022 R255 50 40022 R255 50 4002 R255 50 4002 R255 50
Full name					0000000000			000 C C C C C C C C C C C C C C C C C C
Address					PUCCERARION DUCCERARION DUCCERARION	2558822	2445511222 2445511222 2445511222	UCCCRASSIONER DECEMBER ELVERNASSIONER SUCCCRASSION
			Postco	do I	KARABU DEKU	13333556	erazanaeer Erazanaeer	######################################
			FUSICO	ue		5500000 (3500000 (3500000	20000110000 CM30000000 PM30000000 PM30000000000000000	######################################
Telephone no.			000000000000000000000000000000000000000	X				
E-mail address	s			K H H 2 O D O O O O K H H 2 O D O O O O	HHEREBESSEN	10000000000	CHRESPECKE	E 12 2 3 3 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5
	☐ Mr.	☐ Mrs.	☐ Ms.	☐ Miss	☐ Ot	her _		11300000000000000000000000000000000000
Full name					nn nerritiviti.	230000		10000000000000000000000000000000000000
Address	RADSSESSES RADSS				BRAZOGICEK			105550000000000000000000000000000000000
	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0							
			Dontes	do T	DECERTION OF THE	000000		
			Postco	ue				
Telephone no.		KINNESSEEKKINSSSSS	************					
E-mail address	•		opideki kisi bida		**********	0000000		222 DOGG RANGE OF THE PROPERTY

Full name
Address
Postcode
Telephone no.
E-mail address
☐ Mr. ☐ Mrs. ☐ Ms. ☐ Miss ☐ Other
Full name
Address
Postcode
Telephone no.
E-mail address
If you do not include anyone here you must have two certificate providers at Part B.

	I have read the prescribed information on pages 2, 3 and 4 of thi or	S LFA
	the prescribed information has been read to me by	
12. I confirm that	I give my attorney(s) authority to make decisions on my behalf in circumstances when I lack capacity.	See Note
13. I confirm that	I have chosen between Option A and option B with regard to life-streatment in paragraph 6 of this LPA.	sustaining See Note
14. I confirm that	the person(s) named in paragraph 10 are to be notified when this or	See Note 2
	I do not want anyone to be notified when an application to register and I understand that I need two people to provide a separate center B of this LPA.	
15. I confirm that	☐ I have chosen my certificate provider(s) myself.	See Note 2
16. Signed by me	GERRANDIO GERRANDIO	See Note
17. Date signed (delivered as a deed)	the f	u are unable to sign orm, please refer to the s for completion and to page 14 of this LPA.
	o of	
In the presence	e OI	
18. Signature of witness		See Note :
18. Signature of		See Note 2
18. Signature of witness 19. Full name		See Note
18. Signature of witness19. Full name of witness20. Address of	Postcode Postcode	See Note 2
18. Signature of witness19. Full name of witness20. Address of		See Note 2
18. Signature of witness19. Full name of witness20. Address of		See Note 2

I am signing this that I have signe	LPA at the donor's direction and in the donor's presence and I coed at paragraph 6 according to the donor's direction.	onfirm See Note
21. Signed as		
a deed		
22. Date signed (delivered as a deed)	D D M M Y Y Y Y	
23. Full name		
24. Address		
	Postcode Postcode	
In the presence	of	See Note
25. Signature of witness		
26. Full name of witness		
27. Address of witness		
	Postcode Postcode	
28. Signature of witness		
29. Full name of witness		
30. Address of witness		
	A 200000 E 1172000	



Category A – Knowledge certification		See Note 3
I have known the donor personally over the las	t two years.	
How do you know them?		
0.0000000000000000000000000000000000000		10 10 10 10 10 10
Category B - Skills certification		See Note 3
I am:		
a registered healthcare professional (includes GP)	a barrister, solicitor or advocate	
a registered social worker	an Independent Mental Capacity	Advocate (IMCA)
none of the above but consider that I have to certificate provider.	he relevant professional skills and experti	se to be a
My relevant professional skills and expertise	e are:	
☐ I confirm that I have read Parts A and B of this	LPA and the prescribed	See Note 3
information on pages 2, 3 and 4.		
☐ I confirm that I have read Parts A and B of this		
I confirm that I have read Parts A and B of this information on pages 2, 3 and 4. I confirm that I have discussed the contents of	this LPA with the donor and that the	See Note 3
I confirm that I have read Parts A and B of this information on pages 2, 3 and 4. I confirm that I have discussed the contents of attorney(s) was not present. I understand that I should make efforts to discu	this LPA with the donor and that the	See Note 3
I confirm that I have read Parts A and B of this information on pages 2, 3 and 4. I confirm that I have discussed the contents of attorney(s) was not present. I understand that I should make efforts to discussion present; and I have discussed this LPA with the donor or	this LPA with the donor and that the ass this LPA with the donor without without anyone else present	See Note 3
I confirm that I have read Parts A and B of this information on pages 2, 3 and 4. I confirm that I have discussed the contents of attorney(s) was not present. I understand that I should make efforts to discussion anyone present; and I have discussed this LPA with the donor.	this LPA with the donor and that the ass this LPA with the donor without without anyone else present	See Note 3
□ I confirm that I have read Parts A and B of this information on pages 2, 3 and 4. □ I confirm that I have discussed the contents of attorney(s) was not present. □ I understand that I should make efforts to discussion anyone present; and □ I have discussed this LPA with the donor or □ I have discussed this LPA with the donor □ I have discussed the I have discussed this LPA with the donor □ I have discussed the I	this LPA with the donor and that the ass this LPA with the donor without without anyone else present	See Note 3 See Note 3
I confirm that I have read Parts A and B of this information on pages 2, 3 and 4. I confirm that I have discussed the contents of attorney(s) was not present. I understand that I should make efforts to discussion present; and I have discussed this LPA with the donor or	this LPA with the donor and that the ass this LPA with the donor without without anyone else present	See Note 3
□ I confirm that I have read Parts A and B of this information on pages 2, 3 and 4. □ I confirm that I have discussed the contents of attorney(s) was not present. □ I understand that I should make efforts to discussion anyone present; and □ I have discussed this LPA with the donor or □ I have discussed this LPA with the donor □ I have discussed the I have discussed this LPA with the donor □ I have discussed the I	this LPA with the donor and that the ass this LPA with the donor without without anyone else present	See Note 3
I confirm that I have read Parts A and B of this information on pages 2, 3 and 4. I confirm that I have discussed the contents of attorney(s) was not present. I understand that I should make efforts to discussion anyone present; and I have discussed this LPA with the donor or	this LPA with the donor and that the ass this LPA with the donor without without anyone else present	See Note 3
□ I confirm that I have read Parts A and B of this information on pages 2, 3 and 4. □ I confirm that I have discussed the contents of attorney(s) was not present. □ I understand that I should make efforts to discussion anyone present; and □ I have discussed this LPA with the donor or □ I have discussed this LPA with the donor □ I have discussed the I have discussed this LPA with the donor □ I have discussed the I	this LPA with the donor and that the ass this LPA with the donor without without anyone else present	See Note 3
□ I confirm that I have read Parts A and B of this information on pages 2, 3 and 4. □ I confirm that I have discussed the contents of attorney(s) was not present. □ I understand that I should make efforts to discussion anyone present; and □ I have discussed this LPA with the donor or □ I have discussed this LPA with the donor □ I have discussed the I have discussed this LPA with the donor □ I have discussed the I	this LPA with the donor and that the iss this LPA with the donor without without anyone else present in the presence of:	See Note 3

I certify	See N	ote 4
I certify that in my opinion, at the time wh	nen the donor is making this LPA, that:	
the donor understands the purpose	e of this LPA and the scope of the authority under it;	
no fraud or undue pressure is being	g used to induce the donor to create this LPA; and	
there is nothing else that would pre	event this LPA being created.	
Do not sign this certificate if you have any chave to the attention of the OPG.	doubt about any of the above. You should bring any concerns yo	u
Signature of certificate provider	Date signed See N	ote 4
	D D M M Y Y Y	
(950) 940) 940) 106) 106)		
Full name of certificate provider		
100 C C C C C C C C C C C C C C C C C C		
\$2001 \$2001 \$3000 \$3000		
		00000

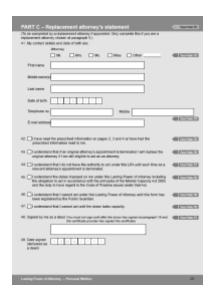


ategory A – Knowledge certification I have known the donor personally over the l	ast two years
How do you know them?	250 000 90000
Tow do you won them.	
Category B - Skills certification	
am:	
a registered healthcare professional (includes GP)	a barrister, solicitor or advocate
a registered social worker	an Independent Mental Capacity Advocate (IMCA)
certificate provider.	e the relevant professional skills and expertise to be a
My relevant professional skills and expert	ise are:
confirm and understand I confirm that I have read Parts A and B of th I confirm that I have discussed the contents of attorney(s) was not present.	is LPA and the prescribed information on pages 2, 3 and 4. of this LPA with the donor and that the cuss this LPA with the donor without anyone present; and
confirm and understand I confirm that I have read Parts A and B of the confirm that I have discussed the contents of attorney(s) was not present. I understand that I should make efforts to discussed this LPA with the done	is LPA and the prescribed information on pages 2, 3 and 4. of this LPA with the donor and that the cuss this LPA with the donor without anyone present; and or without anyone else present
confirm and understand I confirm that I have read Parts A and B of the confirm that I have discussed the contents of attorney(s) was not present. I understand that I should make efforts to discussed this LPA with the done or	is LPA and the prescribed information on pages 2, 3 and 4. of this LPA with the donor and that the cuss this LPA with the donor without anyone present; and or without anyone else present
confirm and understand I confirm that I have read Parts A and B of the confirm that I have discussed the contents of attorney(s) was not present. I understand that I should make efforts to discussed this LPA with the done or	is LPA and the prescribed information on pages 2, 3 and 4. of this LPA with the donor and that the cuss this LPA with the donor without anyone present; and or without anyone else present

cing this LPA, that: e scope of the authority under it; e donor to create this LPA; and created. the above. You should bring any concerns you signed D M M Y Y Y Y A
e scope of the authority under it; e donor to create this LPA; and created. the above. You should bring any concerns you signed
e donor to create this LPA; and created. he above. You should bring any concerns you signed
created. he above. You should bring any concerns you
he above. You should bring any concerns you
igned
CANADA CA
HAND DOCKHAND DOCKHAND DOCK

	iviy contact det	ails and date of birth are:	
		Attorney	
		☐ Mr. ☐ Mrs. ☐ Ms. ☐ Miss ☐ Other	See Note
	First name		
	Middle name(s)		
	Last name		
	Date of birth	D D M M Y Y Y	
	Telephone no.	Mobile	
	E-mail address	s	See Note
32.	N NO DE DESCRIPCIO DE CERTICO	the prescribed information on pages 2, 3 and 4 or have had the prescribed read to me.	See Note
33.	the obligation	d the duties imposed on me under this Lasting Power of Attorney including on to act in accordance with the principles of the Mental Capacity Act 2005 by to have regard to the Code of Practice issued under that Act.	See Note
	the obligation	on to act in accordance with the principles of the Mental Capacity Act 2005	See Note
33. 34. 35.	the obligation and the dut	on to act in accordance with the principles of the Mental Capacity Act 2005 y to have regard to the Code of Practice issued under that Act. d that I cannot act until this form has been registered by the Public Guardian. d that I cannot act under this Lasting Power of Attorney until the donor	
34. 35.	the obligation and the dut	on to act in accordance with the principles of the Mental Capacity Act 2005 y to have regard to the Code of Practice issued under that Act. d that I cannot act until this form has been registered by the Public Guardian. d that I cannot act under this Lasting Power of Attorney until the donor	See Note
34. 35.	the obligation and the dut	on to act in accordance with the principles of the Mental Capacity Act 2005 by to have regard to the Code of Practice issued under that Act. It did that I cannot act until this form has been registered by the Public Guardian. It did that I cannot act under this Lasting Power of Attorney until the donor city.	See Note
34. 35.	the obligation and the dut	on to act in accordance with the principles of the Mental Capacity Act 2005 by to have regard to the Code of Practice issued under that Act. Id that I cannot act until this form has been registered by the Public Guardian. In that I cannot act under this Lasting Power of Attorney until the donor city. In the donor has a deed (You must not sign until after the donor has signed at paragraph 16 and	See Note
34. 35. 36.	the obligation and the duture of the d	on to act in accordance with the principles of the Mental Capacity Act 2005 by to have regard to the Code of Practice issued under that Act. Id that I cannot act until this form has been registered by the Public Guardian. In that I cannot act under this Lasting Power of Attorney until the donor city. In the donor has a deed (You must not sign until after the donor has signed at paragraph 16 and	See Note
34. 35. 36.	the obligation and the duture of the d	on to act in accordance with the principles of the Mental Capacity Act 2005 by to have regard to the Code of Practice issued under that Act. Id that I cannot act until this form has been registered by the Public Guardian. Id that I cannot act under this Lasting Power of Attorney until the donor city. as a deed (You must not sign until after the donor has signed at paragraph 16 and the certificate provider has signed the certificate) DDMMMYYYYYY	See Note
34. 35. 36. 37.	the obligation and the duture of the d	on to act in accordance with the principles of the Mental Capacity Act 2005 by to have regard to the Code of Practice issued under that Act. Id that I cannot act until this form has been registered by the Public Guardian. Id that I cannot act under this Lasting Power of Attorney until the donor city. as a deed (You must not sign until after the donor has signed at paragraph 16 and the certificate provider has signed the certificate) DDMMMYYYYYY	See Note
34. 35. 36. 37. In t 38.	the obligation and the dut I understand lacks capace Signed by me and the dut I understand lacks capace Signed by me and the delivered as a deed) the presence Signature of	on to act in accordance with the principles of the Mental Capacity Act 2005 by to have regard to the Code of Practice issued under that Act. Id that I cannot act until this form has been registered by the Public Guardian. Id that I cannot act under this Lasting Power of Attorney until the donor city. as a deed (You must not sign until after the donor has signed at paragraph 16 and the certificate provider has signed the certificate) DDMMMYYYYYY	See Note
34. 35. 36. 37. In t 38.	the obligation and the dut I understand I understand lacks capact Signed by me and Date signed (delivered as a deed) the presence Signature of witness	on to act in accordance with the principles of the Mental Capacity Act 2005 by to have regard to the Code of Practice issued under that Act. Id that I cannot act until this form has been registered by the Public Guardian. Id that I cannot act under this Lasting Power of Attorney until the donor city. as a deed (You must not sign until after the donor has signed at paragraph 16 and the certificate provider has signed the certificate) DDMMMYYYYYY	See Note
35. 36. 37. In t 38.	the obligation and the dut I understand I understand lacks capace Signed by me and Date signed (delivered as a deed) the presence Signature of witness Full name of witness Address of	on to act in accordance with the principles of the Mental Capacity Act 2005 by to have regard to the Code of Practice issued under that Act. Id that I cannot act until this form has been registered by the Public Guardian. Id that I cannot act under this Lasting Power of Attorney until the donor city. as a deed (You must not sign until after the donor has signed at paragraph 16 and the certificate provider has signed the certificate) DDMMMYYYYYY	See Note

o i. wy contact de	tails and o	date of birth a	re:			
	Attorney					
	Mr.	☐ Mrs.	☐ Ms.	Miss	Other	See Note 4
First name		562477299996447229 562477299996447229	1022 H 123	**************************************	VI 3 3 3 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	
riistriairie	20000000000000000000000000000000000000	0 CE EL 3 30 0 0 0 EE EL 3 5 0 0 5 CE EL 3 5 0 0 0 CE EL 3 5 0 0		E E		
Middle name(s	s)				11 22 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	
					11955 1022 10 55 61 62 61 63 61 61 61 61 61 61 61 61 61 61 61 61 61	
Last name	100 100 100 100 100 100				00 K H H H H H H H H H H H H H H H H H H	
		100 M M M M M M M M M M M M M M M M M M				
Date of birth	D D	ммү	YYY			
Telephone no				Mobile		
E-mail addres		13300000KKA3330000KK 13300005KB3330005KE	330000044333000004433 23000058232300058222	000 CCCARROU CCCARRO 200 CCCRRRROU CCCARRO 200 CCCRRRROU CCCARROU	000684183000668418300068 000684183000668418300068	See Note 4
E-mail addres	5				23000 CE E E E E E E E E E E E E E E E E E	
32. I have read	13/0/0/0/0/0/0/0/0/0/0/0/0/0/0/0/0/		ation on pages 2	2, 3 and 4 or h	ave had the pres	cribed See Note 4
122300 CCC			n ma under this	Lastina Dow	or of Attornov incl	udina (1)
					er of Attorney inclintal Capacity Act	
A X 3 3 5 5 5 5 5 5 7 X 3 3 5 5 5 5 5 7 X 3 5 5 5 5			0 1 10 1	2000555322200555322	00000000000000000000000000000000000000	
and the du		regard to the	Code of Practic	ce issued und	er that Act.	
0 CCARAPPO CCAAAPPO CCAA 0 CCARAPPO CCCAAPPO CCAA 0 CCAA <u>PPO</u> CCCABBO CO CCAB	ty to have				er that Act. d by the Public G	uardian. 🤇 See Note 4
34. 🔲 I understar	ty to have	annot act unti	this form has b	een registere	d by the Public G	
34. 🔲 I understar	ty to have nd that I ca nd that I ca	annot act unti	this form has b	een registere		
34. 🔲 I understar	ty to have nd that I can nd that I can city.	annot act unti annot act und d (You must no	this form has ber this Lasting F	een registered Power of Attorn the donor has sig	d by the Public Goney until the dono	See Note 4
34. I understar 35. I understar lacks capa	ty to have nd that I can nd that I can city.	annot act unti annot act und d (You must no	this form has b	een registered Power of Attorn the donor has sig	d by the Public Goney until the dono	See Note 4
34. I understar 35. I understar lacks capa	ty to have nd that I can nd that I can city.	annot act unti annot act und d (You must no	this form has ber this Lasting F	een registered Power of Attorn the donor has sig	d by the Public Goney until the dono	See Note 4
34. I understar 35. I understar lacks capa 36. Signed by me	ty to have nd that I can nd that I can city. as a deed	annot act unti annot act und d (You must no the certificate	this form has beer this Lasting F t sign until after the provider has sign	een registered Power of Attorn the donor has sig	d by the Public Goney until the dono	See Note 4
 34. I understar 35. I understar lacks capa 36. Signed by me 37. Date signed (delivered as 	ty to have nd that I can nd that I can city.	annot act unti annot act und d (You must no	this form has ber this Lasting F	een registered Power of Attorn the donor has sig	d by the Public Goney until the dono	See Note 4
 34. I understar 35. I understar lacks capa 36. Signed by me 37. Date signed (delivered as a deed) 	ty to have and that I can city. as a deed	annot act unti annot act und d (You must no the certificate	this form has beer this Lasting F t sign until after the provider has sign	een registered Power of Attorn the donor has sig	d by the Public Goney until the dono	See Note 4
 34. I understar 35. I understar lacks capa 36. Signed by me 37. Date signed (delivered as a deed) In the presence 	ty to have and that I can city. as a deed	annot act unti annot act und d (You must no the certificate	this form has beer this Lasting F t sign until after the provider has sign	een registered Power of Attorn the donor has sig	d by the Public Goney until the dono	See Note 4
 34. I understar 35. I understar lacks capa 36. Signed by me 37. Date signed (delivered as a deed) In the presence 	ty to have and that I can city. as a deed	annot act unti annot act und d (You must no the certificate	this form has beer this Lasting F t sign until after the provider has sign	een registered Power of Attorn the donor has sig	d by the Public Goney until the dono	See Note 4
 34. I understar 35. I understar lacks capa 36. Signed by me 37. Date signed (delivered as a deed) In the presence 38. Signature of witness 	ty to have and that I can city. as a deed	annot act unti annot act und d (You must no the certificate	this form has beer this Lasting F t sign until after the provider has sign	een registered Power of Attorn the donor has sig	d by the Public Goney until the dono	See Note 4
 34. I understar 35. I understar lacks capa 36. Signed by me 37. Date signed (delivered as a deed) In the presence 38. Signature of witness 39. Full name 	ty to have and that I can city. as a deed	annot act unti annot act und d (You must no the certificate	this form has beer this Lasting F t sign until after the provider has sign	een registered Power of Attorn the donor has sig	d by the Public Goney until the dono	See Note 4
 34. I understar 35. I understar lacks capa 36. Signed by me 37. Date signed (delivered as a deed) In the presence 38. Signature of witness 	ty to have and that I can city. as a deed	annot act unti annot act und d (You must no the certificate	this form has beer this Lasting F t sign until after the provider has sign	een registered Power of Attorn the donor has sig	d by the Public Goney until the dono	See Note 4
 34. I understar 35. I understar lacks capa 36. Signed by me 37. Date signed (delivered as a deed) In the presence 38. Signature of witness 39. Full name of witness 40. Address of 	ty to have and that I can city. as a deed	annot act unti annot act und d (You must no the certificate	this form has beer this Lasting F t sign until after the provider has sign	een registered Power of Attorn the donor has sig	d by the Public Goney until the dono	See Note 4
 34. I understar 35. I understar lacks capa 36. Signed by me 37. Date signed (delivered as a deed) In the presence 38. Signature of witness 39. Full name of witness 	ty to have and that I can city. as a deed	annot act unti annot act und d (You must no the certificate	this form has beer this Lasting F t sign until after the provider has sign	een registered Power of Attorn the donor has sig	d by the Public Goney until the dono	See Note 4
 34. I understar 35. I understar lacks capa 36. Signed by me 37. Date signed (delivered as a deed) In the presence 38. Signature of witness 39. Full name of witness 40. Address of 	ty to have and that I can city. as a deed	annot act unti annot act und d (You must no the certificate	this form has beer this Lasting F t sign until after the provider has sign	een registered Power of Attorn the donor has sig	d by the Public Goney until the dono	See Note 4
 34. I understar 35. I understar lacks capa 36. Signed by me 37. Date signed (delivered as a deed) In the presence 38. Signature of witness 39. Full name of witness 40. Address of 	ty to have and that I can city. as a deed	annot act unti	this form has beer this Lasting Fit sign until after the provider has sign	een registered Power of Attorn the donor has sig	d by the Public Goney until the dono	See Note 4
 34. I understar 35. I understar lacks capa 36. Signed by me 37. Date signed (delivered as a deed) In the presence 38. Signature of witness 39. Full name of witness 40. Address of 	ty to have and that I ca city. as a deed D D of	annot act unti	this form has beer this Lasting Fit sign until after the provider has sign and the provider has	een registered	d by the Public Goney until the dono	See Note 5



In the presence of	f	See Note 62
50. Signature of witness		
51. Full name of witness		
52. Address of witness		
	Postcode	
	Important - This form cannot be used until it has been r	registered
	by the Office of the Public Guardian and stamped on evo	ery page.
24	Lasting Powe	r of Attorney — Personal Welfare

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 —————	
Name	Address
Telephone no.	
1.515	Postcode
To the named person - You have the right to ob Power of Attorney. You have five weeks from the Details of how to object and the grounds for doin	e day on which this notice is given to object.
Details of the Lasting Power of Attorney (LPA)	
Who is applying to register the LPA?	the donor the attorney(s)
Which type of LPA is being registered?	☐ Property and Affairs ☐ Personal Welfare
(You must complete separate applications for each LPA you wish to register.)	
On what date did the donor sign the LPA?	D D M M Y Y Y
Details of the donor —	
Full name	Address
Telephone no.	
	Postcode

© Crown copyright 2007

Details of the attorney(s)—	
Name of 1st attorney	Address
Telephone no.	
	Postcode
solely together and independently	
	ogether and independently in others
together together in some matters and t	ogether and independently in others
Name of 2 nd attorney	Address
Traine of 2 ditorney	Address
Telephone no.	
	Postcode
together together and independently	
together in some matters and together and indepe	endently in others
Name of 3 rd attorney	Address
Talashara	
Telephone no.	Pasteeds
	Postcode
together together and independently	
together in some matters and together and independent	endently in others
Name of 4 th attorney	Address
Telephone no.	
	Postcode
together together and independently	
together in some matters and together and indepe	endently in others

Signature	and	l da	te –																			
0.9																						
This notice	mus	t be	sign	ed b	y al	l pai	rties	арр	lyir	ng to	re	gis	ster th	ne la	astir	ng po	ower	of a	torn	еу.		
													Print	nar	me							
Signed																						
	_										_											
	\vdash								_		\dashv	ŀ										
												ĺ										
												l										
Dated	D	D	М	М	Υ	Υ	Υ	Υ														

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.

Regulation 11

Application to Register a Lasting Power of Attorney: LPA 002

C Office of the Public Guardian
Application to register a
Lasting Power of Attorney

Return your completed form to:
Office of the Public Guardian
Archway Tower
2 Junction Road
London N19 5SZ

Part 1 - The donor												
	Place a cross (x) against one option											
	Mr. Mrs.	Oth	Other									
		If other, specify	please									
Last name												
First name												
Middle name												
Address 1												
Address 2												
Address 3												
Town/City												
County												
Postcode		Da Tel	ytime no.									
Date of birth	D D M M Y Y Y	ple	ne exac ase sta	t date is te the ye	unknov ear of bi	vn rth						
e-mail address												
	Please do not write below this line - For office use only											

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

© Crown Copyright 2007

Part 2 - The persons making the application	٦	
Note: We need to know who is applying and how the attorney(s) have questions in parts two and three carefully.	been appointed, please answer the	
1	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 togeth	er and independently	
	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 independently in others	and	
Note: We need to know which, if any of the attorney(s) are making th LPA. You can tell us this by putting a cross in the box at the start of eart 4.		
2		

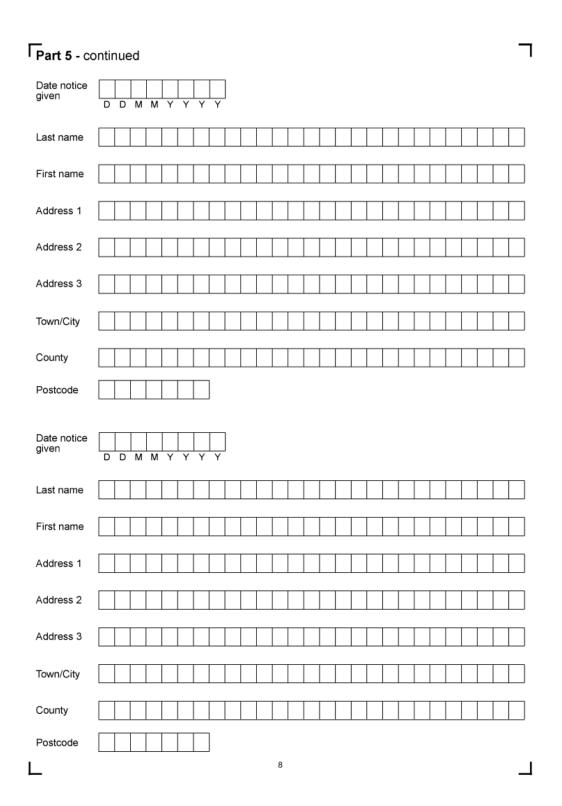
Part 4 - At	ttorney one								
	s (x) in this box if attorney one is applying to register								
	Place a cross (x) against one option								
	Mr. Mrs. Ms. Miss Other								
	If other, please specify								
Last name									
First name									
Middle name									
Company name (if relevant)									
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	s (x) against one option that best describes your relationship to the donor / Spouse Child Solicitor Other Other professional								
If 'Otl	her' or 'Other professional', please specify 3								

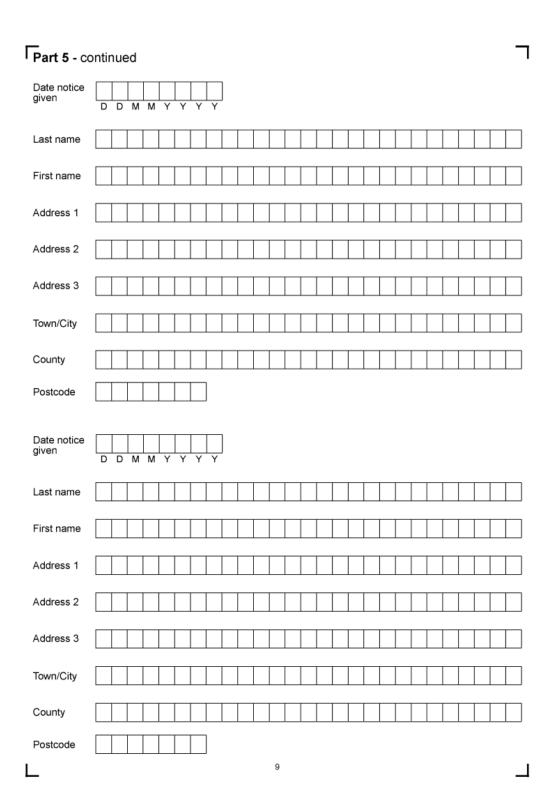
Part 4 - A	Part 4 - Attorney two									
Place a cross	s (x) in this box if attorney two is applying to register									
	Place a cross (x) against one option									
	Mr. Mrs. Ms. Miss Other									
	If other, please specify									
Last name										
First name										
Middle name										
Company name (if relevant)										
Address 1										
Address 2										
Address 3										
Town/City										
County										
Postcode	DX number									
Date of birth	DX Exchange									
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	ther' or 'Other professional', please specify									

Fart 4 - A	ttorney 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	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	ther' or 'Other professional', please specify									

Part 4 - Attorney four If there are additional attorneys,											
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.	Ms.		Miss	Othe	r 📗					
		If oth	er, please								
			,								
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	YYY	DX Excha	inge 🔲							
Daytime Tel. no.											
Occupation											
e-mail address											
	Place a cross (x) against one option that best describes your relationship to the donor Civil partner / Spouse Child Solicitor Other Other professional										
If 'Ot	her' or 'Other prof	essional', plea	se specify								

Part 5 - Notification of named persons												
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 must 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											
	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 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 Public Guard	dian.							
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?									
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 separate application form available from the Office of the Public Guardia		t complete							
Part 7 - Type of power									
apply to register the LPA (the original of which accompanies the donor under the provisions of the Mental Capacity Act 2005.	nis application) mad	le by the							
What type of Lasting Power of Attorney are you applying to register?									
Property and affairs OR Personal welfare									
Date that the donor signed the Lasting Power of Attorney D D M M 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									

Fart 8 - D	Part 8 - Donor declaration								
Note: This se Lasting Powe	tion should only be completed by the donor if they are applying for the registration of the of Attorney.								
I apply to reg	ter the Lasting Power of Attorney (the original of which accompanies this application).								
I 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	Date D D M M Y Y Y Y								
Last name									
First name		ì							
First name									
Part 9 - A	orney(s) declaration								
Note: This so Lasting Powe	tion should only be completed by the attorney(s) if they are applying for the registration of the of Attorney.								
	I We apply to register the Lasting Power of Attorney (the original of which accompanies this application).								
	I We certify that the above information is correct to the best of my knowledge and belief.								
	I We have completed the application within the provisions of the Mental Capacity Act 2005 and all statutory instruments made under it.								
Signed	Date								
	D D M M Y Y Y Y								
Last name									
First name									
		1							
Signed	Date D D M M Y Y Y Y								
	D D M M Y Y Y Y								
Last name									
Final		ì							
First name	11								

Part 9 - co	ontin	ued																					
Signed														Da	te								
																D	D	М	М	Υ	Υ	Υ	Υ
Last name																							
First name																							
Signed														Da	ite	D	D	M	М	Υ	Υ	Υ	Y
Last name																							
First name																							
Signed														Da	te	D	D	М	М	Υ	Y	Y	Y
Last name																							
First name																							
	Part 10 - Declaration by a trust corporation If you are a trust corporation making this application please complete this declaration. We 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.																						
Company name																							
Signature of authorised person(s)]		Со	mpa	any	sea	al (If	арр	lica	ble)	
Last name																							
First name											12												

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														
Company reference														
Address 1														
Address 2														
Address 3														
Town/City														
County														
Postcode		DX number												
		DX Exchange												
Daytime Tel. no.														
e-mail address														

13

Part 12 - Additional inform Please write down any additional in attach additional sheets.	nation formation to support this application in the space below. If necessary	
attach additional sneets.		

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

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 received Guardian.	ved by the Office of the Public
We are sending you this notice because you are named as an attorney in thapplication to register.	ne LPA and were not involved in the
You are hereby given notice of the proposed registration. You have the right Details of how to do so are set out on page 2 of this notice. You have five will date this notice was given. (We will treat this notice as having been given to	eeks in which to object from the
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 the Attorney's full name	above donor.
Attorney's full name	
Attorney's full name	
From The Office of the Public Guardian Archway Tower, 2 Junction Road London N19 5SZ Telephone 0845 330 2900	d © Crown copyright 2007

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.

Part 2: Notice to Donor of Receipt of an Application to Register a Lasting Power of Attorney

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.

Dated

From

Attorney's full name

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

Telephone 0845 330 2900 © Crown copyright 2007

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 reg	istration 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.

@ Crown copyright 2007

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 Attor	ney
has disclaimed appointment.	
Details of attorney disclaiming 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
Signature and date —	
I disclaim my appointment as attorney under the Lastin	g 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.

@ Crown copyright 2007

Details of the donor ———————————————————————————————————		
Name	Address	
Telephone no.	Postcode	
Details of the other attorney(s)		
Name	Address	
Telephone no.	Postcode	
Name	Address	
Telephone no.		
Тетернопе по.	Postcode	
Name	Address	
Telephone no.		
	Postcode	

Regulation 23

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

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	
٦	TAKE NOTICE THAT
	I
_	of
	and I
	of
	The attorney(s) of
	of
	intend to apply to the Public Guardian for registration of the
	enduring power of attorney appointing me (us) attorney(s) and
	made by the donor on the
	You have the right to object to the proposed registration.
	To do so you must make an application to the Court of
	Protection under one (or more) of the grounds set out
	below and then notify the Office of the Public Guardian of
7	that objection within five weeks from the day this notice
	was given to you.
	nas given to you.
	1

The grounds upon which you can object are limited and are shown at 2 overleaf

This form may be adapted for use by three or more attorneys

Give the name and address of the donor

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 with any questions you have regarding the objection (s). 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:
Customer Services
Archway Tower
2 Junction Road
London
N19 5SZ
www.publicguardian.gov.uk

EP1PG – DRAFT V.2

Regulation 24

Application to Register an Enduring Power of Attorney

Office of the Public Guardian Mental Capacity Act 2005 Form EP2PG



Application for Registration of an Enduring Power of Attorney

Mr Mrs Description:	Ms oss ag		ss O		X			her, p	olease re:											_
ast Name:																				
orename 1:																				
Other forenames:				İ			Ì			İ	İ		Ì					Ì	İ	_
Company Vame:																				
ddress 1:																				
Address 2:																				
Address 3:																				
own/City:																				
County:																				
ostcode:																				
onor Date Birth:									exac. se stat											
Birth:	D	D	M N	ΛY	Y	Y	Y	,												
			PI	ease	e do	not	writ	e be	low	this	line	- Fo	r Of	fice	Use	Or	ıly			

Page 1 of 7

Please state the full name and present address of the attorney. Professionals e.g., Solicitors or Accountants, should complete the Company Name field. Mr Mr Ms Ms Miss Other		22000 20000 20000 20000 20000 20000								Part Two						3000 3000 3000 3000 1000 1000							2000
Mr Mrs Ms Miss Other								nt a	ddres	s of the at	torne	y. Pro	fession	als e	g, Se	olici	tors	or A	Acco	unta	nts, s	hould	1
ast Name: Jointly and Severally	Mr Mrs	Ms	M	fiss	Oth	er					e			1		T	T	<u> </u>	T				T
orname 1: other orenames. ompany ame: ddress 2: ddress 3: own/City: ounty: DX No. (solicitors only): Distoned: Tel No.: D D M M Y Y Y Y (STD Code): mail ddress: crupation: Relationship to donor: ivit Partner / Spouse Child Relation Relation Solicitor Professional place a cross against one option Place a cross against one option Place a cross against one option Part B of the Enduring Power of Attorney states whether the attorney is to act jointly, jointly and severally, or along suppointment (Place a cross against one option Jointly and Severally	Place a cros	ss ag	ains	t one	e op	tion	X		spe	city here:	L			+	+	+	_	+	+	+		+	+
Address 1: Indicates 2: Indicates 3: Indicates 3: Indicates 3: Indicates 3: Indicates 3: Indicates 3: Indicates 3: Indicates 3: Indicates 3: Indicates 3: Indicates 3: Indicates 3: Indicates 3: Indicates 4: Indi	ast Name:																						
orenames:	orename 1:																						
ame: ddress 1: ddress 2: ddress 3: pwn/City: punty: unty: punty: p																							
ddress 2: ddress 3: buny/City: bunty: butcode: butcode: butcode: butcode: butcode: butcode: butcode: butcode: butcorney																							
ddress 3: Dawn/City: Daytime Joint formey John May Y Y Y Jointly and Severally Jointly and Severally Jointly and Severally Jointly and Severally Jointly and Severally Jointly and Severally Jointly and Severally	ddress 1:																						
Daytime Daytime Tel No.: Solicitors only): Daytime Daytime Tel No.: Steadies: Cupation: Cother No Other No Other Cother Relation Solicitor Professional Cother Relation Cother Relation Solicitor Professional Cother Re	ddress 2:																						
ounty: DX No. (solicitors only):	ddress 3:																						1
DX No. (solicitors only): Daytime	own/City:	L																					
Second S	ounty:																						
torney ate of Birth: D D M M Y Y Y Y (STD Code): mail ddress: cupation: Relationship to donor: ivil Partner / Other No Other Spouse Child Relation Relation Solicitor Professional relationship: Place a cross against one option Part B of the Enduring Power of Attorney states whether the attorney is to act jointly, jointly and severally, or alone appointment (Place a cross against one option popointment (Place a cross against one option Jointly and Severally Jointly and Severally	stcode:													nly):									
Tel No.: D D M M Y Y Y Y (STD Code): mail ddress: ccupation: Relationship to donor: ivil Partner / Other No Other Spouse Child Relation Relation Solicitor Professional relationship: Place a cross against one option Part B of the Enduring Power of Attorney states whether the attorney is to act jointly, jointly and severally, or alone appointment (Place a cross against one option Jointly and Severally Jointly and Severally																							
mail ddress: Coupation:																							
Relationship to donor: ivil Partner / Other No Other If 'Other Relation' or 'Other Professional', specify Spouse Child Relation Relation Solicitor Professional relationship:	nail	D	D	M	M	Y	Y	Y	Y		(S	ID Code	e):										
Relationship to donor: ivil Partner / Other No Other If 'Other Relation' or 'Other Professional', specify Spouse Child Relation Relation Solicitor Professional relationship:																							_
Appointment (Place a cross against one option \omega): Other No Other If 'Other Relation' or 'Other Professional', specify relationship:	cupation:																						
Spouse Child Relation Relation Solicitor Professional relationship:		to d	onoi		Othe	er		No			Other		If 'O	ther	Rela	tion'	or '	Oth	er Pr	ofess	ional	', spe	cify
Place a cross against one option Part B of the Enduring Power of Attorney states whether the attorney is to act jointly, jointly and severally, or alone appointment (Place a cross against one option Jointly and Severally	Spouse	Chil	ld						n S														
Appointment (Place a cross against one option ☑): Jointly □ Jointly □		_	•	st on	e op	tion	<u>×</u>																
Jointly and Severally	art B of th	e En	dur	ing l	Pow	er o	f At	torn	ey st	ates wheth	er the	e attor	ney is	to ac	t joii	ntly,	joir	ntly	and	seve	rally,	or al	one
Jointly and Severally	nnointmant	(D)-	100		ee c	a ade	et c	10.00	ation				Loint										
	рропшист	(F16	ке а	cr0	ss a	gain	SI 01	ie oļ	мон						Ш								
Alone											Jointl	y and	Severa	lly									
													Alor	ne									

Page 2 of 7

										Par	t Th	ree -	Att	orne	ey T	wo											
Please state							nt ac	ddr	ess of	fthe	atto	rne	y. Pı	ofes	sio	nals	e.g.	So	licit	tors	or .	Acc	ount	ants	, sho	uld	
Mr Mrs				Oth		X			Othe				IDDOKE				0000				2000				0000		1000
Last Name:																											
Forename 1:																											
Other Forenames:																											
Company Name:																											
Address 1:																											
Address 2:																											
Address 3:																											
Town/City:																											
County:																											
Postcode:														DX (solic		only):										
DX Exchange (solicitors only)																											
Attorney Date of Birth:											vtime No.:																
Email Address:	D	D	M	M	Y	Y	Y	Y				(S	TD C	ode):													
Occupation:																											
Relationship Civil Partner Spouse Place a cre	Chi	ld]	R	Othe elati	on	Rel	No latio	n	Solic	itor]		Other				Othe			ion'	or '	Oth	er P	rofe	ssion	ıal', s	spec	ify
Please state complete the	the ne Co	full i	nam uny l	e an	ıd pı ıe fic	rese	nt ac			f the		orne					e,g,	So	licit	tors	or	Acc	ount	ants	, sho	uld	
Place a cre	$\overline{}$	_	_	e opi	tion	X			ecify			L	<u> </u>	<u> </u>						L	<u> </u>	<u>_</u>	+	+			L
Last Name:										_		_	_	_						_	<u></u>	<u> </u>	+	+			
Forename 1:																											

Page 3 of 7

Part Four Continued Overleaf

								Pa	rt Four	- Att	orney	Thre	ee cor	ıt'd									
Other Forenames:			130001		3000		30000			1000000		DERESS	3000001		10000	199000		333330	I COLUMN	33366	CERRO	00000	
Company Name:																							
Address 1:																							
Address 2:																							
Address 3:																							
Town/City:																							
County:											Ì												
Postcode:					Ī								No.	only):			Ì		T	T			
DX Exchange (solicitors only):					T														T				
Attorney					T					ytime l No.:				Ť	Ť	T	+	<u> </u>	T				
Date of Birth:	D	D	M	M	Y	Y	Y	Y	16	I No.:	(STI) Code):										
Email Address:																							
Occupation:																							
Relationship	to d	lono	r.																				
Civil Partner / Spouse C			Rel	_		Nelat	ion		icitor P	_				Other tionsl		ation	or	'Oth	er Pı	rofes	siona	al', s	pecify
□□ Place a cross	∐ aga	inst e	one i	_	on 🗵		I	l															
If there are of this form	addi								plete th								Info	rmat	tion'	sect	tion ((at th	e end
I (We) the a																the	don	or u	nder	the	End	urin	g
I (We) have					-						•												
Date that the																							
Tou can jina	iriis	2		D O	me.	Lina		5101	rer oy 11	norne		D D	M	М	Y	Y	Y	Y					
To your kno Powers of A				the I	Dono	r m	ade a	ıny o	ther En	during		Yes 		oss ag	ain:	st one	е орі	tion l	×				
If 'Yes', plea	ase g	give (deta	ils b	elow	inc	ludi	ng re	gistratio	n date	e if ap	plical	ole:										

Page 4 of 7

				P	art S	Six -	Notice of	Appl	ication t	o Donor									
Notice must be notice. The da										r if some	one otl	ier tl	nan	the	atto	rney	(s)	give	s th
I (We) have gi	ven no	tice o	of the a	pplic	ation	n to	register in	the p	prescrib	ed form (EP1PC	š) to	the	don	or p	erso	nall	ly,	
on this date:																			
L	D D	М	M Y	v	v	v													
If someone othe	r than	the a					the donor	r pleas	se comp	ete the na	me and	l add	ress	deta	ils b	elov	v. Pl	lease	als
full Name:																			
Address 1:																			
Address 2:																			
Address 3:																			
Γown/City:																			
County:		*********								Pos	stcode:								******
Please place a control (We) have gi									P1PG)		г	relat	ives	of t	he d	lono	r:		
Full Name:									Relation	ship to D	onor:				_				
Address:												Date	e no	tice	give	n:			

		*********										D	D	M	M	Y	Y	Y	Y
Full Name:									Relation	ship to D	onor:								
Address:											l L	Date	e no	tice	give	n:			
- 1												D	D	M	M	Y	Y	Y	Y
											J								
'ull Name:									Relation	ship to D	onor:								
Full Name:									Relation	ship to D	onor:[Date	e no	tice	give	n:			
_									Relation	nship to D	onor:	Date	e no	tice	give	n:			
_		**********							Relation	nship to D	onor:						Y	Y	Y
_										ship to D							Y	Y	Y
Address:													D	M	M	Y	Y	Y	Y
Address:												D	D	M	M	Y	Y	Y	Y
Address:												D	D not	M ice §	M	Y 1:		Y	
Address:									Relation		onor: [D	D not	M ice §	M	Y 1:			
Address: Full Name: Address:									Relation	ship to Do	onor: [D	D not	M ice §	M given	Y Y			
Address:									Relation	ship to Do	onor: [D Date	D D	M M ice §	M given	Y Y	Y	Y	

Page 5 of 7

all Name: Relati	onship to Donor:	Dat	e no	tice	give	en.			
ull Name: Relati			e no	tice	give	en:			
	onship to Donor:		e no	tice	giv	en:			
full Name: Relati	onship to Donor:	D			_	UII.			
	onship to Donor:	D							Τ
	onship to Donor:		D	M	М	Y	Y	Y	,
	onship to Donor.	_	_			_	_	_	_
uuress.		Dat	e no	tice	give	en:			_
					5.,,	Ţ	Т	Т	T
		L	Ļ	<u> </u>	Ļ.				_
		D	D	М	M	Y	Y	Y	
Part Nine - Fees									
we you enclosed a cheque for the registration fee for this application	? Yes 🗌 No 🗌	Plac	e a c	ross	ag	ains	t on	е ор	tio
to you wish to apply for postponement, exemption or remission of		D.1						•	
ne fee?	Yes 🗌 No 🗌	Plac	e a c	ross	ag	ains	t on	e op	tio
yes, please complete the application for exemption or remission form	L.								
Part Ten - Declarat	ion								
Note: The application should be signed by all attorneys who are m		tion.	Th	is m	ust	not	pre	-dat	e t
date(s) when the notices were given.									
I (We) certify that the above information is correct and that to the complied with the provisions of the Mental Capacity Act 2005.	best of my (our)	knov	vled	ge a	nd	belie	ef I ((We) h
	7								
Signed:	Dated:								
	_	D	D	M	M	3.7			
						1	Y	Y	Y
Signed:	Dated:					Y	Y	Y	Y
Signed	Dated:	D	D	M	M				Y
]	D	D	M	М				
Signed:	Dated:		D D			Y	Y	Y	Y

Page 6 of 7

Mr Mrs Description: Mr Mrs Place a cross	Ms	Miss			3	If Other, please specify here:														
ast Name:																				
Forename 1:																				
Other Forenames:																				Ť
Company Name:			П		Ì			Ť			Ť					Ť	Ť	П		Ť
Company Reference:																				Ì
Address 1:																				
Address 2:																				
Address 3:																				
own/City:																				
County:																				
ostcode:											X No	D. rs only	r):						T	Ī
X Exchange solicitors only):																				Ť
Daytime Tel No.:											Ť									
	(STD	Code):																		
Email Address:																				
						Part	t Twe	lve -	Addit	ional l	Infor	matic	on							
Please write additional p							on to	supp	ort th	is app	licati	on in	the s	pace	below	. If ı	ieces	sary a	ttach	
-				33355			200000				333333			1111000						

Page 7 of 7

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 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).