

## **To Complete Application Forms For Power Of Attorney We Will Need:**

For the *donor* (the person granting the power to an attorney):

Title, full name, address, date of birth, e-mail address (optional)

For the *attorney(s)* (there can be more than one)

Title, full name, address, date of birth, e-mail address (optional)

You can also nominate *Replacement Attorneys* should any of the originally appointed attorneys be unwilling or unable to continue acting. Same details required.

*People to notify* when the LPA is registered:

This section is to provide details of people who should be formally notified of the application. These should be people the donor knows well and would be willing to raise concerns about the LPA, should they have any.

Title, full name, address

*The person making the application:*

Title, full name, address, date of birth, e-mail address (optional), phone number

### **Completing the application:**

In addition to the donor and the attorney(s) and replacement attorney(s), one or two further people will be required: (they do not need to attend the appointment, their part can be completed later)

*Certificate provider:*

An impartial person who confirms that the donor understands what they are doing and are not being forced to make the application.

The certificate provider must be:

At least 18 years old; *and either*

A friend, colleague or someone you have known well for at least two years; *or*

Your doctor or lawyer or someone with the professional skills to judge whether you understand what you are doing and are not being forced to make the LPA

*Witness*

To all signatures. Your certificate provider can also be your witness.