

# A Guide for Lasting Powers of Attorney

A Lasting Power of Attorney is a legal document that allows you to choose someone (the “Attorney”) you trust to make decisions about things such as your health care or finances on your behalf at a time in the future when you may lack the mental capacity to make those decisions for yourself.

A Lasting Power of Attorney can only be used when it is registered with the Office of the Public Guardian.

There are two different types of Lasting Power of Attorney:-

- ❖ Health and Welfare Lasting Power of Attorney which allows your attorney to make decisions on your behalf about your personal welfare, including whether to give or refuse consent to medical treatment on your behalf and deciding where you live. These decisions can only be taken on your behalf when you lack capacity to make them yourself (for example if you are ill, unconscious or because of the onset of conditions such as dementia).
- ❖ A Property and Affairs Lasting Power of Attorney allows your attorney or attorneys to make decisions on your behalf about your property and affairs including paying your bills, collecting your benefits or other income, or selling your house subject to any restrictions and conditions.

## **YOUR PERSONAL DETAILS**

Full Name (including all middle names)	
Other names you are known by or have been known by (i.e. maiden name)	
Address (including post code)	
Date of Birth	
Telephone No.	
E-mail address	
Marital Status	
Give details of any other Power of Attorney/Living Will that you have	

## **TYPE OF LASTING POWER OF ATTORNEY**

Tick which Lasting Power of Attorney you wish to make:

Property and Affairs Lasting Power of Attorney

Health and Welfare Lasting Power of Attorney

## CHOICE OF ATTORNEY

Consider the following when choosing an Attorney:-

- ❖ They must be over 18 years of age
- ❖ They must not be an undischarged or interim bankrupt person, if you are making a property and affairs power
- ❖ They must be absolutely trustworthy and have the appropriate skills to make decisions on your behalf
- ❖ They should be people with whom you have a settled and easy relationship and if more than one, who get on with each other well, or who are likely to do so
- ❖ You can appoint one attorney but it is advisable to appoint more than one to lessen the chance of abuse of the power and to ensure continuity in case he or she cannot act
- ❖ They can be family members, friends or your professional advisor such as Dale & Co
- ❖ They must agree to be your attorney and should understand the role they will be fulfilling
- ❖ If they know the people who will be notified on registration, they should have a good relationship with them
- ❖ If you want more than two attorneys, add additional names on a separate sheet of paper

Attorney No. 1	
Full Name	
Address	
Date of Birth	
Telephone No	
Email Address	
Relationship to you	
Occupation	

Attorney No. 2	
Full Name	
Address	
Date of Birth	
Telephone No	
Email Address	
Relationship to you	
Occupation	

## IF YOU CHOOSE MORE THAN ONE ATTORNEY

- ❖ If you have more than one attorney they can act together (never alone) or together and independently so that they can sometimes sign together and sometimes separately. This works well when the attorneys do not live near each other or if one were to retire or die then the other attorney could still act. If you appoint your attorneys together then the power will end if for example one dies, or loses mental capacity or decides he or she no longer wants to act.
- ❖ You can, if you require, set out which matters you want your attorneys to act in together and when they can act together or independently. This may, however, prove difficult to work in practice with some financial institutions.
- ❖ If you appoint your spouse or civil partner, dissolution of your marriage or civil partnership will end the appointment of your spouse/civil partner unless you have indicated otherwise.

I would like my attorneys to act (tick the relevant box):-

- Together
- Together and independently
- Some matters together and some matters independently

Please provide details:

.....  
.....  
.....

## REPLACEMENT ATTORNEYS

You can appoint a replacement attorney to act in place of an original appointed attorney where he or she is unable to act.

Replacement Attorney No. 1	
Full Name	
Address	
Date of Birth	
Telephone No	
Relationship to you	
Occupation	

Replacement Attorney No. 2	
Full Name	
Address	
Date of Birth	
Telephone No	
Relationship to you	
Occupation	

## RESTRICTIONS

If you do not place any restrictions on your Lasting Power of Attorney, your attorney will be able to make decisions that you are able to make over your property and finances, if you are making a property and affairs power or over your health and welfare decisions if you are making a personal welfare power.

You may include legally binding restrictions or conditions on how your attorney should act for you. You do not need to include any and it is usually not advisable as it can prevent flexibility.

These could include preventing your attorney from making any gifts e.g. birthday presents, preventing your attorney from selling or dealing with your home, restricting where you live, restricting who you have contact with or who has contact with you. Please provide details (if any) below.

Life sustaining treatment – you must choose in the personal welfare power whether you wish your attorney to be able to give or refuse life sustaining medical treatment which is based on the circumstances at the time and not the treatment. It does not authorise euthanasia. Please confirm if you wish your attorney to give or refuse life sustaining treatment:-

Option A:

Giving your attorney authority to make these decisions

Option B:

Not giving your attorney such authority

(Health and Welfare LPA only)

## GUIDANCE FOR YOUR ATTORNEY

You may also include discretionary guidance for your attorneys to assist them in making decisions on your behalf. This could include people you would like your attorney to consult when making decisions, your views, beliefs and values which may affect how the attorney makes decisions as to where you would like to live etc. Please provide details (if any) below.

## **PAYING YOUR ATTORNEYS**

Generally family and friends would not expect to be paid to act as your attorney but they can recover out of pocket expenses paid on your behalf. If you have professional attorneys they will need to be paid for their work and this must be specifically set out in the power.

## **NOTIFYING PEOPLE OF REGISTRATION OF THE POWER**

You can choose up to five people to be notified but these cannot be an attorney or a replacement attorney. When the Lasting Power of Attorney is registered with the Office of the Public Guardian they will be notified of registration. It is an important safeguard as they can raise concerns on your behalf.

Ideally the notified people should be:-

- ❖ A person with whom you are likely to have contact throughout your life such as a family member or close friend.
- ❖ A person who is interested in your best interests and wellbeing.
- ❖ You should tell them that you are naming them and make sure that they are happy to be named in their role. If you decide that no one is to be notified you will need to have two certificate providers.

Named Person No. 1	
Full Name	
Address	
Relationship to you	

Named Person No. 2	
Full Name	
Address	
Relationship to you	

Named Person No. 3	
Full Name	
Address	
Relationship to you	

Named Person No. 4	
Full Name	
Address	
Relationship to you	

Named Person No. 5	
Full Name	
Address	
Relationship to you	

## **YOUR CHOSEN CERTIFICATE PROVIDER**

An independent person must complete a certificate of capacity, confirming that you are making the Lasting Powers of Attorney of your own free will, that you understand its purpose and the powers you are giving your attorneys.

If Dale & Co are not appointed as your attorney in your Lasting Power of Attorney then we can act as your certificate provider. If, however, you have decided to appoint Dale & Co as your attorney please let us know who you would like to be your certificate provider. For more information, please ask us for further details about your choices regarding a certificate provider.

Full Name	Address	Knowledge/Skills Expertise