

Lasting Power of Attorney Instruction Form

**Herrington
Carmichael**
S O L I C I T O R S

This document is to record your wishes in respect of the Lasting Powers of Attorney you wish to make it is not the actual Lasting Power of Attorney (LPA).

There are 2 types of Lasting Powers of Attorney. Please indicate which documents you wish to make:

Financial Decisions:

- Managing your bank and savings accounts
- Buying and selling investments
- Paying your bills
- Buying or selling your house

Yes, I would like this.

Health and Care Decisions:

- The type of healthcare and medical treatment you receive, including life-sustaining treatment
- Day-to-day matters, such as your diet and daily routine
- Where you live

Yes, I would like this.

Glossary of Terms

Donor: The person who is appointing someone to help them make decisions at a time when they are not able to make those decisions themselves or need help in doing so.

Attorney: The person who has been trusted to help the donor to make decisions when assistance is needed. There is no limit to the number of attorneys that can be appointed but where there is more than one, it is essential that they can work together. It is also possible to appoint replacement attorneys.

Certificate Provider: One of the safeguards in a Lasting Power of Attorney is to require someone to go through the document with the Donor.

They sign to confirm that the Donor is not being forced or coerced into appointing an Attorney and that the Donor fully understands what they are doing.

A Certificate Provider must either:

- a) have relevant professional skills, such as a doctor or lawyer; or
- b) have known the donor well for at least 2 years, such as a friend or colleague.

People to notify: These are people who are told that you have made a Lasting Power of Attorney and who you have appointed. They are able to raise concerns before the document is validated if they think the Donor has been pressured to make the Appointment.

Please note here the information needed to complete your Lasting Power of Attorney documents

Donor (you)

Title:

First Names:

Last Name:

Any other names you are known by:

Date of Birth:

Address (including post code):

Telephone No:

Email address:



London
+44 (0)203 755 0557

Camberley
+44 (0)1276 686 222w

Wokingham
+44 (0)118 977 4045



info@herrington-carmichael.com
www.herrington-carmichael.com

Attorneys (who you trust to help you)

Space is given for up to 4 Attorneys. If you wish to appoint more than 4, then please attach their details on additional sheets.

Title:

First Names:

Last Name:

Any other names you are known by:

Date of Birth:

Address (including post code):

Telephone No:

Email address:

Title:

First Names:

Last Name:

Any other names you are known by:

Date of Birth:

Address (including post code):

Telephone No:

Email address:

Title:

First Names:

Last Name:

Any other names you are known by:

Date of Birth:

Address (including post code):

Telephone No:

Email address:

Title:

First Names:

Last Name:

Any other names you are known by:

Date of Birth:

Address (including post code):

Telephone No:

Email address:



How would you like Attorneys make decisions:

Jointly and severally

Attorneys can made decisions on their own without discussing a situation with any other attorney, but also after any discussion they deem appropriate. There is nothing to stop the Attorneys making a decision together but this enables one attorney to make a decision on their own if, for example, they feel the matter in question is a simple day-to-day issue or in an emergency situation. One attorney's decision has effect as if all of the attorneys had made it. It also means that if one of the Attorneys died, then the others would be able to carry on.

Yes, I would like this.

Jointly

Here the Attorneys must all act and make decisions together. Whatever action or decision is needed, all must be in agreement, sign whatever needs signing and give instructions together. If one of the Attorneys dies then the appointment of all of the Attorneys fails.

Yes, I would like this.

Jointly for some decisions, jointly and severally for other decisions

If Attorneys are to act in this way, then it must be absolutely clear what decisions are included in each category. Also, the problem of one of the Attorneys dying remains for joint decisions and will have the effect of removing that section of the LPA. The remaining Attorneys will not be able to make decisions which were given on a joint basis unless a replacement Attorney has been nominated.

Yes, I would like this.

Is the power to be useable immediately or only if you become mentally* incapable of managing by yourself ?

*Be aware that if you only become physically incapable of dealing with your affairs, your attorneys would not then be able to help you.

Immediately

Once mentally incapable

Replacement Attorneys

Replacement attorneys step in when an original Attorney dies or is not capable of acting for you any more. If more than one replacement attorney is nominated then they will all step in at once unless specific instruction is given otherwise. Space is given for up to 2 replacement Attorneys. If you wish to appoint more than 2, then please attach their details on additional sheets.

Title:

First Names:

Last Name:

Any other names you are known by:

Date of Birth:

Address (including post code):

Telephone No:

Email address:

Title:

First Names:

Last Name:

Any other names you are known by:

Date of Birth:

Address (including post code):



Telephone No:

Email address:

Life-sustaining treatment

Part of the Health and Welfare document includes a section about life-sustaining treatment. A decision must be made at the time of signing the Lasting Power of Attorney document as to whether the appointed Attorneys can consent to or refuse life-sustaining treatment on your behalf.

People to notify

Space is given for up to 2 people to be notified formally. If you wish to notify more than 2, then please attach their details on additional sheets. It is not compulsory to notify anyone but this is a safeguard that you may wish to consider, particularly if your attorneys are not close family or if there may be a delay before the LPA is registered. You can also notify people informally and would generally be encouraged to make family and close friends aware of the arrangements you are setting up.

Title: First Names:

Last Name:

Relationship to you:

Address (including post code):

Title: First Names:

Last Name:

Relationship to you:

Address (including post code):

Preferences and instructions

It is possible to include written instructions or guidance notes for your Attorneys to help them in reaching decisions at a time when you are not able to make your wishes known. Use this space to note down any guidance notes or instructions that you would like included in the Lasting Power of Attorney document.

Certificate Provider

Title: First Names:

Last Name:

Relationship to you:

Date of Birth:

Address (including post code):

Court Registration Fees:

There is a fee payable to the Office of the Public Guardian for registration and validation of the Power of Attorney. This fee is currently £82 for each application.

Are you eligible for a fee exemption?

Please indicate if any of the following apply to you:

Fees are exempt if you are in receipt of:

- Income support
- Income-based job-seeker's allowance
- Income-based Employment and Support Allowance
- State Pension Guarantee Credit element of Pension Credit
- Combination of Working Tax Credit and with Child Tax Credit, Disability Element or Severe Disability Element
- Housing Benefit
- Council Tax Benefit (not the 25% single occupancy reduction, or exemption)
- Local housing allowance

If YES then no fee is payable.

Please provide documentary proof of entitlement of benefits. You are not entitled if you have also received an award of more than £16,000 which was disregarded for the purposes



of determining eligibility for the benefits listed above. If you have, then you may still be eligible for a fee remission.

Are you eligible for a fee remission?

Does your Gross Income (i.e. gross income before tax and national insurance are deducted) fall within band below? If so, then you may be eligible for a remission.

Gross income: £0 - £12,000 - 50% remission

To claim this remission, you need to provide documentary proof of gross income – copies of bank statements, annual pension statements, etc.

Unfortunately, the costs of our time in proving the entitlement would exceed the costs saving to you and we cannot therefore make the claim on your behalf. You would need to liaise directly with the Office of Public Guardian to claim this remission yourself.

Notes

Any additional notes or information you will need documented. Please put here:



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