

GENERAL POWER OF ATTORNEY

Appointing a person or persons as your attorney (general powers)

Use this form if you want someone to act as your attorney for financial matters **while you have capacity**.

Use an enduring power of attorney form if:

- (a) you want someone to act as your attorney now **and** to continue to act as your attorney if at some future time you should lose capacity.
- (b) you want someone to act as your attorney **only** if at some future time you should lose capacity.



Appointing a person or persons as your attorney

As principal (the person making the appointment), you complete this form by writing your responses on the lines and ticking the appropriate boxes. Then sign the form and have your signature witnessed. Any adult may witness your signature. However, if this power of attorney is required to be registered under the Land Titles Act, the witness must be a justice of the peace, a commissioner for declarations, a lawyer or a notary public.

Appointment of attorney or attorneys

1. I, _____ ,
[Print your full name here]
of _____ ,
[Print your address here]
appoint the following person/s as my attorney/s:

[Print here the name/s (or official position) of the person/s you want to act as your attorney/s]

2. Are you appointing more than one attorney ?

- ☐ No ➡ Go to clause 4.
☐ Yes.

3. How do you prefer that they make their decisions? (Tick one box only)

- ☐ Severally (any one of them may decide)
☐ Jointly (unanimously)
☐ As a majority (specify, e.g. simple majority, two-thirds majority, etc.)

☐ Other*

Note: The Powers of Attorney Act 1998 allows you to appoint successive attorney/s for a matter so that the power is given to a particular attorney only when power to a previous attorney ends. You can nominate the circumstances that a power will end (eg. if x leaves the jurisdiction, y may act).

4. The attorney/s power is subject to the following terms:

5. The power given to my attorney/s begins:

- ☐ immediately.
- ☐ on this date: _____

[Write here the date when you want the appointed person/s to begin acting as your attorney.]

- ☐ on this occasion: _____

[Write here the occasion on which you want the appointed person/s to begin acting as your attorney.]

Note: If you do not complete clause 5, the power begins immediately.

6. This power of attorney gives my attorney/s power to do, on my behalf, anything that I could lawfully do by an attorney (other than a personal/health matter), subject to the above terms.

[Sign your name here]

[Your witness signs here]

[Designation of witness]

[Write the date here]



QUEENSLAND GOVERNMENT

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