

活動記録簿

会派・議員名

無所属・松本直高

年 月 日	令和4年4月11日		
目的・内容・結果等	<p>全国的に任意後見制度の利用が伸び悩んでいるところ、交野市では、令和3年度より所謂「成年後見利用促進法」に基づく中間機関が設置され、地域福祉において成年後見制度の普及及び利用促進を進めている。そこで、世界的に任意後見制度(意思決定支援制度)の利用が進んでいるイギリスの制度を参考として、交野市が公的な仕組みの中で任意後見制度も活用することで、より一層の成年後見制度の利用が図れ得るものかを考察し、市に提言する目的をもって取り寄せた資料の翻訳を依頼したものである。</p>		
活動に要した経費	行 先	利用交通機関	利 用 区 間
			金 額
			円
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	小 計		円
	経費内容	金 額	内 訳
	翻訳手数料	90,000円	
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小 計		90,000円	
合 計		90,000円	
備 考			

領収書

松本 直高 様

金 90,000 円也

但、イギリス意思支援決定制度資料翻訳手数料として

令和4年4月11日上記正に領収いたしました



Lasting power of attorney

Financial decisions

Use this for:

- running your bank and savings accounts
- making or selling investments
- paying your bills
- buying or selling your house

How to complete this form

PLEASE WRITE IN CAPITAL LETTERS USING A BLACK PEN

Mark your choice with an X

■ If you make a mistake, fill in the box and then mark the correct choice with an X

Don't use correction fluid. Cross out mistakes and rewrite nearby. Everyone involved in each section must initial each change.

Making an LPA online is simpler, clearer and faster

Our smart online form gives you just the right amount of help exactly when you need it:

www.gov.uk/power-of-attorney

This form is also available in Welsh. Call the helpline on 0300 456 0300.

The people involved in your LPA

You'll find it easier to make an LPA if you first choose the people you want to help you. Note their names here now so you can refer back later.

People you must have to make an LPA

Donor

If you are filling this form in for yourself, you are the donor. If you are filling this in for a friend or relative, they are the donor.

Attorneys

Attorneys are the people you pick to make decisions for you.

They don't need legal training. They should be people you trust and know well; for example, your husband, wife, partner, adult children or good friends.

Choose one attorney or more. If you have a lot, they might find it hard to make decisions together.

Certificate provider

You need someone to confirm that no one is forcing you to make an LPA and you understand what you are doing.

This is your 'certificate provider'. They must either:

- have relevant professional skills, such as a doctor or lawyer
- have known you well for at least two years, such as a friend or colleague

Some people can't be a certificate provider. See the list in the Guide, part A10

Witnesses

You can't witness your attorneys' signatures and they can't witness yours. Anyone else over 18 years old can be a witness.

People you might want to include in your LPA

Replacement attorneys

You don't have to appoint replacement attorneys but they help protect your LPA. Without them, your LPA might not work if one of your original attorneys stops acting for you.

People to notify

'People to notify' add security. They can raise concerns about your LPA before it's registered – for example, if they think you are under pressure to make the LPA.

次のことのために使用します。

- ・銀行と普通預金口座の運用
- ・投資に関する意思決定
- ・請求書の支払い
- ・家屋の売買

このフォームに記入する方法

黒のペンを使用して大文字で書いてください

X で選択をマークします

■ 間違えた場合、ボックスに記入してから正しい選択肢に X を付けてください。

修正液は使用せずに誤った記載を修正してください。

各セクションに関係する全ての人が、各変更を修正する必要があります。

「LPA」証書作成をオンラインにより行くと、より簡単、明確で迅速です。

便利なオンラインフォームには必要な「ヘルプ」が記載されています。

www.gov.uk/power-of-attorney

このフォームはウェールズ語でも利用できます。

下記のヘルプラインに電話してください。

0300 4560300

あなたの LPA（永続的代理権：任意後見制度）に関係する人々へ

最初に支援したい人を選択すると、LPA 証書を作成するのが簡単になります。

後ほど参照できるように、ここに関係者の氏名をメモしてください。

LPA 証書を作成する必要がある人

委任者

自分自身のためにこの書式に記入しているなら、あなたは委任者です。

友人もしくは親戚のために記入している場合、彼らが委任者です。

代理人（受任者）

代理人は委任者のために意思決定をする人です。

代理人になるために法的な訓練は不要です。

あなたの配偶者やパートナー、親や子供、または良い友達など、あなたが信頼し、よく知っている人々でなければなりません。

一人以上の代理人を選択してください。

ただし、代理人が多ければ、代理人と一緒に意思決定を行うことが難しくなるかもしれません。

証明書発行者

あなたは、誰からも LPA を強制されていないこと、あなたが自身の行為を理解していることを確認してもらう必要があります。

証明書発行者は以下のいずれかである必要があります。

- ・ 関連する専門的な技能を有する医師や代理人
- ・ 少なくとも 2 年以上、あなたをよく知っている友人や同僚

上記に該当しても証明書発行者になれない人もいます。

ガイドのパート A10 のリストを参照してください。

証明者

18 歳以上の人は誰でも証人になることができます。

ただし、あなたは代理人の署名の証人になることはできませんし、代理人はあなたの署名の証人になることもできません。

LPA に含めたいと思う人

交代（予備）代理人

交代代理人を任命する必要はありませんが、交代代理人はあなたの LPA を保護するのに有益です。

交代代理人を任命せず、代理人が一人しかいない場合、代理人が委任を解除した時、LPA は機能しない可能性があります。

代理人が死亡・意識障害、罷免、関係解消または破産等をした場合に備え、予備の交代代理人を登録しておく事ができます。

通知人

通知人は安全性をより強固にします。

彼らは、あなたの LPA が登録に際して懸念を提起する可能性があります。

たとえば LPA を作成するように圧力がかかっていると考えている場合です。

Lasting power of attorney for property and financial affairs

Section 1 The donor

You are appointing other people to make decisions on your behalf. You are 'the donor'

Restrictions – you must be at least 18 years old and be able to understand and make decisions for yourself (called 'mental capacity')

不動産・金融等の資産管理に関する LPA

セクション1 委任者

あなたの利益を守るために意思決定をするために他の人々を任命します。

あなたは「委任者」です。

制限事項 – 18 歳以上で、ものごとを理解し、自己で意思決定する能力が必要です（「判断能力」といいます。）。

Section 2 The attorneys

The people you choose to make decisions for you are called your 'attorneys'. Your attorneys don't need special legal knowledge or training. They should be people you trust and know well. Common choices include your husband, wife or partner, son or daughter, or your best friend.

You need at least one attorney, but you can have more.

You'll also be able to choose 'replacement attorneys' in section 4. They can step in if one of the attorneys you appoint here can no longer act for you.

To appoint a trust corporation, fill in the first attorney space and tick the box in that section. They must sign Continuation sheet 4. For more about trust corporations, see the Guide, part A2

Restrictions – Attorneys must be at least 18 years old and must have mental capacity to make decisions. They must not be bankrupt or subject to a debt relief order.

セクション2 代理人

あなたのための意思決定をするために選任する人々はあなたの「代理人」と呼ばれます。

代理人になるために特別な法的知識や訓練は不要です。

代理人は、あなたが信頼し、よく知っている人々でなければなりません。

一般的な選択肢には、夫、妻、パートナー、息子または娘もしくは親友が含まれます。

少なくとも一人の代理人が必要ですが、複数の代理人を選任することもできます。

また、セクション4で「交代代理人」を選任することもできます。

交代代理人は、指名した代理人の一人が行動できなくなった場合、支援することができます。

代理人に信託会社を選任する場合、最初の代理人のスペースに記入し、チェックボックスにチェックを入れます。

続けてシート4に署名する必要があります。

信託会社の詳細については、ガイドのパートA2を参照してください。

制限事項 – 代理人は、18歳以上であり、意思決定をする判断能力を備えている必要があります。

破産したり債務救済命令を受けたりしてはいけません。

Section 3 How should your attorneys make decisions?

You need to choose whether your attorneys can make decisions on their own or must agree some or all decisions unanimously.

Whatever you choose, they must always act in your best interests.

I only appointed one attorney (turn to section 4)

How do you want your attorneys to work together? (tick one only)

Jointly and severally

Attorneys can make decisions on their own or together. Most people choose this option because it's the most practical. Attorneys can get together to make important decisions if they wish, but can make simple or urgent decisions on their own. It's up to the attorneys to choose when they act together or alone. It also means that if one of the attorneys dies or can no longer act, your LPA will still work. If one attorney makes a decision, it has the same effect as if all the attorneys made that decision.

Jointly

Attorneys must agree unanimously on every decision, however big or small. Remember, some simple decisions could be delayed because it takes time to get the attorneys together. If your attorneys can't agree a decision, then they can only make that decision by going to court.

Be careful – if one attorney dies or can no longer act, all your attorneys become unable to act. This is because the law says a group appointed 'jointly' is a single unit. Your LPA will stop working unless you appoint at least one replacement attorney (in section 4).

Jointly for some decisions, jointly and severally for other decisions

Attorneys must agree unanimously on some decisions, but can make others on their own. If you choose this option, you must list the decisions your attorneys should make jointly and agree unanimously on Continuation sheet 2. The wording you use is important. There are examples in the Guide, part A3.

Be careful – if one attorney dies or can no longer act, none of your attorneys will be able to make any of the decisions you've said should be made jointly. Your LPA will stop working for those decisions unless you appoint at least one replacement attorney (in section 4). Your original attorneys will still be able to make any of the other decisions alongside your replacement attorneys.

セクション3 代理人はどのように意思決定をするべきか?

代理人が各自で意思決定を行うか、一部または全ての意思決定に全員一致で同意によって行う必要があるかを選択できます。

あなたの選択に拘わらず、代理人は、常にあなたの『最善の利益』のために行動しなければなりません。

- 私は代理人を一人だけ任命しました（セクション4に移ります）

代理人にどのように協力してもらいたいですか（1つだけチェックしてください）？

- 共同と個別

代理人は、自分でまたは共同で意思決定をすることができます。

このオプションが最も実用的であるため、ほとんどの人がこのオプションを選択します。

代理人は、必要に応じて協議によって重要な意思決定をすることができますが、自分で簡易または緊急の意思決定をすることができます。

共同で意思決定するか、単独で意思決定するかは代理人次第です。

また、代理人の一人が死亡した場合、または行動できなくなった場合でも LPA は機能します。

一人の代理人が意思決定を下した場合、全ての代理人がその意思決定を行った場合と同じ効果があります。

- 共同

代理人は、軽重を問わず、全ての意思決定について全員一致で合意する必要があります。

代理人の招集に時間がかかるため、いくつかの簡単な意思決定が遅延する可能性があることを忘れないでください。

あなたの代理人が意思決定に同意できない場合、彼らは法廷に行くことによってのみその意思決定をすることができます。

注意- 一人の代理人が死亡するか、職務を遂行できなくなった場合、全ての代理人が意思決定することができなくなります。

これは「共同で」任命されたグループは、単一の意思意思決定機関であると法律が定めているためです。

少なくとも一人の交代代理人を任命しない限り LPA は機能しなくなります（セクション4）。

- 決められた事項は共同で、他の事項は共同もしくは各々で

代理人は、いくつかの事項について全員一致で同意する必要がありますが、他の事項は一人で行うことができます。

このオプションを選択する場合、代理人が共同で行うべき事項をリスト化し、継続シート2に全員一致で同意する必要があります。

リストアップする内容は重要です。

ガイドのパート A3 に例を参考にしてください。

注意- 一人の代理人が亡くなったり、職務の遂行ができなくなったりした場合、あなたの代理人は、共同で行うべき事項の意思決定をすることができなくなります。

あなたが少なくとも一人の交代代理人を任命しない限り、あなたの LPA は、意思意思決定機能を停止します (セクション4で)。

元の代理人は、後任の代理人と一緒に他の意思決定を行うことができます。

Section 4 Replacement attorneys

This section is optional, but we recommend you consider it

Replacement attorneys are a backup in case one of your original attorneys can't make decisions for you anymore.

To appoint a trust corporation, fill in the first attorney space below and tick the box in that section. They must sign Continuation sheet 4.

Reasons replacement attorneys step in – if one of your original attorneys dies, loses capacity, no longer wants to be your attorney, becomes bankrupt or subject to a debt relief order or is no longer legally your husband, wife or civil partner.

Restrictions – replacement attorneys must be at least 18 years old and have mental capacity to make decisions. They must not be bankrupt or subject to a debt relief order.

More replacements – I want to appoint more than two replacements. Use Continuation sheet 1.

When and how your replacement attorneys can act

Replacement attorneys usually step in when one of your original attorneys stops acting for you. If there's more than one replacement attorney, they will all step in at once. If they fully replace your original attorney(s) at once, they will usually act jointly. You can change some aspects of this, but most people don't. See the Guide, part A4.

I want to change when or how my attorneys can act (optional). Use Continuation sheet 2.

セクション4 交代代理人

このセクションはオプションですが、検討することをお勧めします。

交代代理人は、元の代理人の一人が職務遂行不能となった際の補完になります。

信託会社を任命するには、下の最初の代理人欄に記入し、その中のボックスにチェックを入れます。

その場合、継続シート 4 に署名する必要があります。

交代代理人が支援する理由 - 元の代理人の一人が死亡した場合、能力を失った場合、弁護士になりたくない場合、破産した場合、または債務救済命令の対象となった場合、または法的に夫、妻またはパートナーではなくなった場合。

制限 - 交代代理人は、少なくとも 18 歳で、判断能力を有している必要があります、破産したり債務救済命令を受けたりしてはなりません。

交代代理人追加 - 二人以上の交代代理人を任命したい。

継続シート 1 を使用します。

交代代理人がいつ、どのように行動できるか

通常、交代代理人は、元の代理人の一人が職務を遂行できなくなった際に支援します。

複数の交代代理人がいる場合、全てが一度に介入します。

元の代理人が全て一度に交代したならば、通常、交代代理人は共同で行動します。

あなたは、かかる状況を変更することができますが、ほとんどの人ができません。

ガイドのパート A4 を参照してください。

代理人がいつ、どのように行動できるかを変更したい(オプション)。

継続シート 2 を使用します。

Section 5 When can your attorneys make decisions?

You can allow your attorneys to make decisions:

- as soon as the LPA has been registered by the Office of the Public Guardian

- only when you don't have mental capacity

While you have mental capacity you will be in control of all decisions affecting you. If you choose the first option, your attorneys can only make decisions on your behalf if you allow them to. They are responsible to you for any decisions you let them make.

Your attorneys must always act in your best interests.

When do you want your attorneys to be able to make decisions?

- As soon as my LPA has been registered (and also when I don't have mental capacity)

Most people choose this option because it is the most practical. While you still have mental capacity, your attorneys can only act with your consent. If you later lose capacity, they can continue to act on your behalf for all decisions covered by this LPA.

This option is useful if you are able to make your own decisions but there's another reason you want your attorneys to help you – for example, if you're away on holiday, or if you have a physical condition that makes it difficult to visit the bank, talk on the phone or sign documents.

- Only when I don't have mental capacity

Be careful – this can make your LPA a lot less useful. Your attorneys might be asked to prove you do not have mental capacity each time they try to use this LPA.

セクション5 代理人はいつ意思決定をすることができるか?

代理人に意思決定させるタイミング

- LPA が公共後見人事務所に登録後
- 判断能力が失われた後

意思能力がある間、あなたは自己に影響を与える全ての意思決定をコントロールできます。

最初の選択肢を選んだ場合、代理人は、あなたが許可した場合にのみ、あなたに代わって意思決定をすることができます。

その場合、代理人は、あなたが委任した行為についてのみ直接責任を負います。

代理人は、常にあなたの最善の利益のために行動しなければなりません。

代理人の職務遂行はいつですか?(一つだけ選択)

- LPA 証書の登録後すぐに(そして私が判断能力を持っていないとき)

多くの人は、最も実用的であるため、このオプションを選択します。

あなたが判断能力を持っている間、代理人は、あなたの同意を得てのみ行動することができます。

後に判断能力を失った場合でも LPA の対象となる全ての意思決定について、代理人は、あなたに代わって判断し続けることができます。

このオプションは、自分で意思決定をすることができるものの、代理人に助けをもらいたい別の理由がある場合に役立ちます。

たとえば、あなたが休暇で不在の場合や体調不良で銀行に行くのが難しい場合に、代理人が電話で交渉したり書類へ署名したりします。

判断能力がなくなったときだけ

注意してください - このオプションは LPA の有用性が大幅に低下する可能性があります。

代理人は、彼らが LPA を利用しようとするたびに、あなたが判断能力を有していないことを証明するように頼まれるかもしれません。

Section 6 People to notify when the LPA is registered

This section is optional.

You can let people know that you're going to register your LPA. They can raise any concerns they have about the LPA – for example, if there was any pressure or fraud in making it.

When the LPA is registered, the person applying to register (you or one of your attorneys) must send a notice to each 'person to notify'

You can't put your attorneys or replacement attorneys here.

People to notify can object to the LPA, but only for certain reasons (listed in the notification form LP3). After that, they are no longer involved in the LPA. Choose people who care about your best interests and who would be willing to speak up if they were concerned.

- I want to appoint another person to notify (maximum is 5) – use Continuation sheet 1.

セクション 6 LPA が登録されたときに通知する人

このセクションはオプションです。

LPA を登録することを周知することができます。

彼らは LPA について有している懸念(例えば、意思決定の際に圧力や詐欺があった場合)を提起することができます。

LPA が登録されると、登録を申請する人(あなたまたは代理人の一人)は、各「通知人」に通知を送信する必要があります。

代理人や交代代理人に通知人を配置することはできません。

通知人は LPA に異議を申し立てることができますが、特定の理由(通知フォーム LP3 にリストされているもの)に限ります。

その後、彼らは、もはや LPA に関与することができません。

あなたの最善の利益を気にかけて、心配していたら喜んで声を上げてくれる人を選んでください。

- 通知する相手を指名したい(最大 5 人) - 継続シート 1 を使用します。

Section 7 Preferences and instructions

This section is optional

You can tell your attorneys how you'd prefer them to make decisions, or give them specific instructions which they must follow when making decisions. Most people leave this page blank – you can just talk to your attorneys so they understand how you want them to make decisions for you.

Preferences

Your attorneys don't have to follow your preferences but they should keep them in mind. For examples of preferences, see the Guide, part A7

Preferences – use words like 'prefer' and 'would like'

- I need more space – use Continuation sheet 2

Instructions

Your attorneys will have to follow your instructions exactly. For examples of instructions, see the Guide, part A7.

Be careful – if you give instructions that are not legally correct they would have to be removed before your LPA could be registered.

Instructions – use words like ‘must’ and ‘have to’

I need more space – use Continuation sheet 2.

セクション 7 設定と指示

このセクションはオプションです。

代理人にどのように意思決定をしてもらいたいかを伝えたり、意思決定をするときに従わなければならない具体的な指示を与えることができます。

ほとんどの人は、このページを空白のままにします。

代理人に口答で指示するだけで、代理人はあなたのためにどのように意思決定を行ってほしいかを理解してくれます。

設定

代理人は、あなたの設定に従う必要はありませんが、代理人は、あなたの希望に従って行動するはずで

設定の例については、ガイドのパート A7 を参照してください。

設定- 「どっちがいい」や「こうして欲しい」などの単語を使用します。

私はより多くのスペースが必要です - 継続シート 2 を使用してください

指示

代理人はあなたの指示に正確に従わなければなりません。

手順の例については、ガイドのパート A7 を参照してください。

注意 - 法的に正しくない指示を与えた場合 LPA を登録する前に削除する必要があります。

指示 - 「しなければならない」や「する必要があります」などの言葉を使う。

私はより多くのスペースが必要です - 継続シート 2 を使用してください。

Section 8 Your legal rights and responsibilities

Everyone signing the LPA must read this information

In sections 9 to 11, you, the certificate provider, all your attorneys and your replacement attorneys must sign this lasting power of attorney to form a legal agreement between you (a deed).

By signing this lasting power of attorney, you (the donor) are appointing people (attorneys) to make decisions for you.

LPAs are governed by the Mental Capacity Act 2005 (MCA), regulations made under it and the MCA Code of Practice. Attorneys must have regard to these documents. The Code of Practice is available from www.gov.uk/opg/mca-code or from The Stationery Office.

Your attorneys must follow the principles of the Mental Capacity Act:

- 1 Your attorneys must assume that you can make your own decisions unless it is established that you cannot do so.
- 2 Your attorneys must help you to make as many of your own decisions as you can. They must take all practical steps to help you to make a decision. They can only treat you as unable to make a decision if they have not succeeded in helping you make a decision through those steps.
- 3 Your attorneys must not treat you as unable to make a decision simply because you make an unwise decision.
- 4 Your attorneys must act and make decisions in your best interests when you are unable to make a decision.
- 5 Before your attorneys make a decision or act for you, they must consider whether they can make the decision or act in a way that is less restrictive of your rights and freedom but still achieves the purpose.

Your attorneys must always act in your best interests. This is explained in the Application guide, part A8, and defined in the MCA Code of Practice.

Before this LPA can be used:

- it must be registered by the Office of the Public Guardian (OPG)
- it may be limited to when you don't have mental capacity, according to your choice in section 5

Cancelling your LPA: You can cancel this LPA at any time, as long as you have mental capacity to do so. It doesn't matter if the LPA has been registered or not. For more information, see the Guide, part D.

Your will and your LPA: Your attorneys cannot use this LPA to change your will. This LPA will expire when you die. Your attorneys must then send the registered LPA, any certified copies and a copy of your death certificate to the Office of the Public Guardian.

Data protection: For information about how OPG uses your personal data, see the Guide, part D.

セクション 8 法的権利と責任

LPA に署名する全てのユーザーは、このインフォメーションを読む必要があります。

セクション9から11では、あなた、証明書提供者、全ての代理人および交代代理人は、このLPAに署名する必要があります。

このLPAに署名することにより、あなた（委任者）は、あなたのために意思決定をする人（代理人）を任命します。

LPAは、2005年意思能力決定法（MCA）、それに基づいて作成された規制、およびMCA行動規範に準拠しています。

代理人はこれらの文書を考慮しなければなりません。

行動規範は www.gov.uk/opg/mca-code または関係省庁で入手できます。

代理人はMCAの原則に従わなければなりません。

1 代理人は、あなたがそうすることができないことが立証されない限り、あなたが意思決定をすることができるかと仮定しなければなりません。

2 代理人は、できるだけ多くのあなたの意思決定を支援しなければなりません。

代理人は、あなたの意思決定を支援するために全ての実用的な課程を経なければなりません。

代理人は、あなたがそれらの過程を経ても、意思決定の支援に成功していない場合のみ、あなたが意思決定をすることができないものとみなすことができます。

3 代理人は、あなたが賢明でない判断を行うという理由だけで、あなたを意思決定能力がない者として扱ってはなりません。

4 代理人は、あなたが意思決定を行うことができないとき、あなたの最善の利益のために行動し、意思決定を支援しなければなりません。

5 代理人があなたのために意思決定を支援する前に、代理人は、意思決定の支援の可否、またはあなたの権利と自由の制限が少なく、それでも目的を達成する方法での支援の可否を検討しなければなりません。

代理人は常にあなたの最善の利益のために行動しなければなりません。

これは、申請ガイドのパートA8で説明されMCAの実践規範で定義されています。

このLPAを使用する前に、以下のことを行います。

・LPAは後見庁(OPG)によって登録されなければなりません。

・セクション5での選択に応じて、判断能力がない場合に限定されることがあります。

LPAのキャンセル: LPAは、判断能力がある限り、いつでも解除できます。

LPAが登録されているかどうかは関係ありません。

詳細については、ガイドのパートDを参照してください。

遺言と LPA: 代理人は、あなたの遺言に変更を加えるために LPA を使うことはできません。

LPA はあなたの死亡により無効となります。

その場合、代理人は、登録された LPA、疎明資料のコピーおよび死亡診断書のコピーを後見庁に送付する必要があります。

データ保護: 後見庁があなたの個人データをどのように使用するかについては、ガイドのパート D を参照してください。

Section 9 Signature: donor

By signing on this page I confirm all of the following:

- I have read this lasting power of attorney (LPA) including section 8 'Your legal rights and responsibilities', or I have had it read to me
- I appoint and give my attorneys authority to make decisions about my property and financial affairs, including when I cannot act for myself because I lack mental capacity, subject to the terms of this LPA and to the provisions of the Mental Capacity Act 2005
- I have either appointed people to notify (in section 6) or I have chosen not to notify anyone when the LPA is registered
- I agree to the information I've provided being used by the Office of the Public Guardian in carrying out its duties

Donor

Signed (or marked) by the person giving this lasting power of attorney and delivered as a deed.

If you have used Continuation sheets 1 or 2 you must sign and date each continuation sheet at the same time as you sign this page.

If you can't sign this LPA you can make a mark instead. If you can't sign or make a mark you can instruct someone else to sign for you, using Continuation sheet 3.

Witness

The witness must not be an attorney or replacement attorney appointed under this LPA, and must be aged 18 or over.

セクション 9 署名: 委任者

次の全てを確認した上で、このページに署名してください。

- ・セクション8「あなたの法的権利と責任」を含むこのLPAを読んだか、読み聞かせてもらいました。
- ・このLPAの条件および2005年意思決定能力法(MCA)の規定に従い、判断能力が不足しているため、自分で行動できない場合を含め、自己の財産および財務に関する意思決定を行う権限を、代理人を任命して付与します。
- ・通知人を任命したか(セクション6)、LPAの登録時に誰にも通知しないことを選択しました。
- ・提供した情報が、後見庁がその職務を遂行するために使用することに同意します。

委任者

この永続的代理権限を付与される者によって署名(またはマーク)され、証書として送達されます

継続シート1または2を使用した場合、このページに署名すると同時に、各継続シートに署名して日付を記入する必要があります。

このLPAに署名できない場合、代わりにマークを付けることができます。署名またはマークを付けることができない場合は、継続シート3を使用して他者に署名するよう指示できます。

証人

証人は、このLPAに基づいて任命された代理人または交代代理人であってはならず、18歳以上である必要があります。

Section 10 Signature: certificate provider

Only sign this section after the donor has signed section 9

The 'certificate provider' signs to confirm they've discussed the lasting power of attorney (LPA) with the donor, that the donor understands what they're doing and that nobody is forcing them to do it. The 'certificate provider' should be either:

- someone who has known the donor personally for at least 2 years, such as a friend, neighbour, colleague or former colleague
- someone with relevant professional skills, such as the donor's GP, a healthcare professional or a solicitor

A certificate provider can't be one of the attorneys

Certificate provider's statement

I certify that, as far as I'm aware, at the time of signing section 9:

- the donor understood the purpose of this LPA and the scope of the authority conferred under it
- no fraud or undue pressure is being used to induce the donor to create this LPA
- there is nothing else which would prevent this LPA from being created by the completion of this instrument

By signing this section I confirm that:

- I am aged 18 or over
- I have read this LPA, including section 8 'Your legal rights and responsibilities'
- there is no restriction on my acting as a certificate provider
- the donor has chosen me as someone who has known them personally for at least 2 years OR
- the donor has chosen me as a person with relevant professional skills and expertise

Restrictions – the certificate provider must not be:

- an attorney or replacement attorney named in this LPA or any other LPA or enduring power of attorney for the donor
- a member of the donor's family or of one of the attorneys' families, including husbands, wives, civil partners, in-laws and step-relatives
- an unmarried partner, boyfriend or girlfriend of either the donor or one of the attorneys (whether or not they live at the same address)
- the donor's or an attorney's business partner
- the donor's or an attorney's employee
- an owner, manager, director or employee of a care home where the donor lives

セクション 10

署名： 証明書提供者

このセクションには、委任者がセクション 9 に署名した後に署名してください。

「証明書提供者」は、LPA に関して委任者と協議を行ったこと、委任者が自分の行為を理解していること、そして誰からも強制されていないことを確認した上で署名します。

「証明書提供者」は次のいずれかである必要があります。

- ・友人、隣人、同僚や元同僚など、少なくとも2年以上、委任者を個人的に関係がある者
 - ・委任者のかかりつけ医、医療従事者や弁護士など、関連する専門的知見を有する者
- 証明書提供者は代理人の一人になることはできません。

証明書提供者の誓約

私は、私が知る限り、セクション9に署名した時点で、次のことを証明します。

- ・委任者は、LPAの目的、それに基づく永続的代理権限の範囲を理解していました
- ・LPA証書を作成するように、委任者を誘導するために詐欺や過度の圧力が使用されていません。
- ・この文書によって、このLPA証書の作成を妨げるものは他にありません。

次のことを確認した上でこのセクションに署名してください。

- ・私は18歳以上です。
- ・セクション8「あなたの法的権利と責任」を含むこのLPAを読みました。
- ・証明書提供者としての私の行為に制限はありません。
- ・委任者が、私を少なくとも2年以上、個人的に交流のある知人として選んだか、委任者が私を関連する専門的スキルと専門知識を有する者として選びました。

制限事項 - 証明書提供者は次のことをしてはなりません。

- ・このLPAまたは他の人のLPAで代理人もしくは交代代理人として指名されていること、または委任者の成年後見人となっていること
- ・夫、妻、シビル・パートナー（市民パートナー）、義理の親族や義理の親族などの委任者の家族または代理人の家族の一人
- ・委任者または代理人の一人の未婚のパートナー、ボーイフレンドまたはガールフレンド（同居は無関係）
- ・委任者または代理人のビジネスパートナー
- ・委任者または代理人の従業員
- ・委任者が住んでいるケアホームの所有者、ディレクター、マネージャーまたは従業員

Section 11 Signature: attorney or replacement

Only sign this section after the certificate provider has signed section 10

All the attorneys and replacement attorneys need to sign.

There are 4 copies of this page – make more copies if you need to.

By signing this section I understand and confirm all of the following:

- I am aged 18 or over
- I have read this lasting power of attorney (LPA) including section 8 'Your legal rights and responsibilities', or I have had it read to me
- I have a duty to act based on the principles of the Mental Capacity Act 2005 and to have regard to the Mental Capacity Act Code of Practice
- I must make decisions and act in the best interests of the donor
- I must take into account any instructions or preferences set out in this LPA
- I can make decisions and act only when this LPA has been registered and at the time indicated in section 5 of this LPA

Further statement by a replacement attorney: I understand that I have the authority to act under this LPA only after an original attorney's appointment is terminated. I must notify the Public Guardian if this happens.

Attorney or replacement attorney

Signed (or marked) by the attorney or replacement attorney and delivered as a deed.

Witness

The witness must not be the donor of this LPA, and must be aged 18 or over.

セクション 11 署名:代理人または交代代理人

証明書提供者がセクション 10 に署名した後で、このセクションに署名してください。

全ての代理人と交代代理人が署名する必要があります。

このページのコピーは 4 つあります – 必要に応じてさらにコピーを作成してください。

次の全てを確認し、理解した上でこのセクションに署名してください。

- 私は 18 歳以上です。
- セクション 8 「あなたの法的権利と責任」を含むこの LPA を読んだか、読み聞かせてもらいました。
- 私には、2005 年の MCA の原則に基づいて行動し、MCA の行動規範を尊重する義務があります。

- ・私は委任者の最善の利益のために意思決定を行い、行動しなければなりません。
- ・この LPA 証書に規定されている指示や設定を考慮に入れる必要があります。
- ・私は、この LPA 証書が登録され、この LPA のセクション 5 に示されている時点でのみ、意思決定を行い、行動することができます。

交代代理人によるさらなる通知 - 私は、元の代理人の任命が終了した後のみ、この LPA 証書に基づいて行動する権限を有していることを理解しています。

これが発生した場合、後見庁に通知する必要があります。

代理人または後任の代理人

代理人または交代代理人により署名（またはマーク）されることで証書として引き渡されます。

証人

証人はこの LPA の委任者であってはならず 18 歳以上でなければなりません。

Now register your LPA

Before the LPA can be used, it must be registered by the Office of the Public Guardian (OPG). Continue filling in this form to register the LPA. See part B of the Guide.

People to notify

If there are any 'people to notify' listed in section 6, you must notify them that you are registering the LPA now. See part C of the Guide. Fill in and send each of them a copy of the form to notify people – LP3. When you sign section 15 of this form, you are confirming that you've sent forms to the 'people to notify'.

Register now

You do not have to register immediately, but it's a good idea in case you've made any mistakes. If you delay until after the donor loses mental capacity, it will be impossible to fix any errors. This could make the whole LPA invalid and it will not be possible to register or use it.

今すぐ LPA を登録してください

LPA を利用する前に後見庁 (OPG) によって登録されている必要があります。

引き続き、このフォームに記入して LPA を登録してください。

ガイドのパート B を参照してください。

通知する人

セクション6に記載されている「通知する人」がいる場合、LPAを今すぐ登録していることを通知する必要があります。ガイドのパートCを参照してください。

通知する人ためのフォームのコピーをそれぞれに記入して送信します-LP3。

このフォームのセクション15に署名すると、「通知する人」にフォームを送信したことを確認したことになります。

今すぐ登録

すぐに登録する必要はありませんが、万が一に備えて、すぐ登録することをお勧めします。

委任者が判断能力を失うまで登録されていないと誤記載を修正することができなくなります。その場合LPA全体が無効になり、登録または制度利用ができなくなります。

Register your lasting power of attorney

Section 12 The applicant

You can only apply to register if you are either the donor or attorney(s) for this LPA. The donor and attorney(s) should not apply together.

Who is applying to register the LPA? (tick one only)

- Donor – the donor needs to sign section 15
- Attorney(s) – If the attorneys were appointed jointly (in section 3) then they all need to sign section 15. Otherwise, only one of the attorneys needs to sign

Write the name and date of birth for each attorney that is applying to register the LPA. Don't include any attorneys who are not applying.

LPA の登録

セクション 12 申請者

LPAの委任者または代理人である場合にのみ登録申請することができます。

委任者と代理人は共同申請すべきではありません。

誰が LPA の登録を申請していますか (1つだけチェックを入れてください) ?

- 委任者 - 委任者はセクション 15 に署名する必要があります
- 代理人 - 複数の代理人が共同で任命された場合 (セクション 3) 、全ての代理人がセクション 15 に署名する必要があります。

それ以外の場合は代理人の一人だけが署名する必要があります。

LPA の登録申請を行う各代理人の名前と生年月日を書いてください。

申請していない代理人は含めないでください。

Section 13 Who do you want to receive the LPA?

We need to know who to send the LPA to once it is registered. We might also need to contact someone with questions about the application.

We already have the addresses of the donor and attorneys, so you don't have to repeat any of those here, unless they have changed.

Who would you like to receive the LPA and any correspondence?

- The donor
- An attorney (write name below)
- Other (write name and address below)

How would the person above prefer to be contacted?

You can choose more than one.

- Post
- Phone
- Email
- Welsh (we will write to the person in Welsh)

セクション 13 LPA を誰に受け取らせたいですか?

登録後 LPA の送信先を認知する必要があります。

また、申請について質問がある場合、誰かに連絡する必要があります。

委任者と代理人の住所は記入済みのため、変更がない限り、改めて記載する必要はありません。

LPAと通信を誰に受け取りたいですか？

- 委任者
- 代理人(下に氏名を書いてください)
- その他(下記に氏名と住所を記入)

上記の人は希望の連絡手段はどれですか？

複数選択できます。

- 郵送
- 電話
- 電子メール
- ウェールズ語(ウェールズ語の使用者に手紙を書きます)

Section 14 Application fee

There's a fee for registering a lasting power of attorney – the amount is shown on the cover sheet of this form or on form LPA120.

The fee changes from time to time. You can check you are paying the correct amount at www.gov.uk/power-of-attorney/how-much-it-costs or call 0300 456 0300. The Office of the Public Guardian can't register your LPA until you have paid the fee.

How would you like to pay?

- Card For security, don't write your credit or debit card details here.

We'll contact you to process the payment.

Your phone number

- Cheque Enclose a cheque with your application.

Reduced application fee

If the donor has a low income, you may not have to pay the full amount. See the Guide, part B4 for details.

I want to apply to pay a reduced fee

You'll need to fill in form LPA120 and include it with your application.

You'll also need to send proof that the donor is eligible to pay a reduced fee.

Are you making a repeat application?

If you've already applied to register an LPA and the Office of the Public Guardian said that it was not possible to register it, you can apply again within 3 months and pay a reduced fee.

I'm making a repeat application

セクション 14 申請料

LPA を登録するには手数料がかかります。

手数料の額は、このフォームのカバーシートまたはフォーム LPA120 に示されています。

手数料の額は随時変更されます。

www.gov.uk/power-of-attorney/how-much-it-costs で正しい金額を支払っていることを確認するか 0300-456-0300 に電話してください。

後見庁は手数料が支払われるまで LPA を登録できません。

支払方法の選択

カード 安全対策のため、クレジットカードやデビットカードの詳細をここには書かないでください。

お支払いの手続については連絡いたします。

小切手 申請書に小切手を同封します。

申請料の減免

委任者の低所得者の場合、手数料を全額支払う必要はありません。

詳細についてはガイドのパート B4 を参照してください。

減免申請をしたい

フォーム LPA120 に記入し、申請書に含める必要があります。

また、寄付者が減額手数料を支払う資格を有することの疎明書類を送付する必要があります。

再申請の有無

すでに LPA の登録申請を行い、後見庁に登録拒否されている場合 3 か月以内に再度申請して減額手数料を支払うことができます。

私は再申請しています

Section 15 Signature

Do not sign this section until after sections 9, 10 and 11 have been signed.

The person applying to register the LPA (see section 12) must sign and date this section. This is either the donor or attorney(s) but not both together.

If the attorneys are applying to register the LPA and they were appointed to act jointly (in section 3), they must all sign.

By signing this section I confirm the following:

- I apply to register the LPA that accompanies this application
- I have informed 'people to notify' named in section 6 of the LPA (if any) of my intention to register the LPA
- I certify that the information in this form is correct to the best of my knowledge and belief

Check your lasting power of attorney

You don't have to use this checklist, but it'll help you make sure you've completed your LPA correctly.

- The donor filled in sections 1 to 7.
- The donor signed section 9 in the presence of a witness. The donor also signed any copies of continuation sheets 1 and 2 that were used, on the same date as signing section 9.
- The certificate provider signed section 10.
- All the attorneys and replacement attorneys signed section 11, in the presence of witness(es).

- Sections 9, 10 and 11 were signed in order. Section 9 must have been signed first, then section 10, then section 11. They can be dated the same day or different days.
- The donor or an attorney completed sections 12 to 15. If the attorneys are applying and were appointed 'jointly' (section 3), they have all signed section 15 of this form.
- I've paid the application fee or applied for a reduced fee. If I've applied for a reduced fee, I've included the required evidence and completed form LPA120A.
- If there were any people to notify in section 6, I've notified them using form LP3.
- I've not left out any of the pages of the LPA, even the ones where I didn't write anything or there were no boxes to fill in.

セクション 15 署名

セクション 9、10、および 11 に署名後に、このセクションに署名してください。

LPA 登録の申請者（セクション 12 を参照）は、このセクションに署名して日付を記入する必要があります。

これは、委任者または代理人のいずれかによりますが、両者が共同ではできません。

代理人が LPA の登録を申請していて、複数代理人として任命された場合（セクション 3）、全ての代理人が署名する必要があります。

次のことを確認した上でこのセクションに署名して下さい。

- ・この申請に添付されている LPA の登録を申請します。
- ・LPA のセクション 6 に記載されている「通知人」（存在する場合）に、LPA を登録する意向を通知しました。
- ・この書式の情報が、私の知識と信念の範囲内で正しいことを証明します。

記入内容の確認

このチェックリストを使用する必要はありませんが、申請が正しく完了したことを確認するのに役立ちます。

- 委任者はセクション 1 からセクション 7 に記入しました。
- 委任者は証人の前でセクション 9 に署名しました。

また、委任者は、セクション9に署名するのと同じ日に、使用された継続シート1および2のコピーにも署名しました。

- 証明書提供者がセクション10に署名しました。
- 全ての代理人と交代代理人は、証人の立会いの下でセクション11に署名した。
- セクション9、10、11は順番に署名されました。

セクション9が最初に署名され、次にセクション10、次にセクション11が署名されている必要があります。

日付は同じ日でも異なる日でもかまいません。

- 委任者または代理人はセクション12から15を完了しました。

代理人が申請し、複数代理人とされた場合（セクション3）全ての代理人がこのフォームのセクション15に署名しています。

- 申請料を支払ったか、減額手数料を申請しました。

割引料金を申請した場合、必要な証拠を含め、フォームLPA120Aに記入しました。

- セクション6で通知人がいた場合、フォームLP3を使用して通知しました。

- 未記入のページやボックスがあったとしても、意図してそうしたものでありLPAのどの項目も省略していません。



Office of the
Public Guardian

Form

LP1F



Lasting power of attorney



Financial decisions

Registering
an LPA costs

£82

This fee is means-tested:
see the application
Guide part B

Use this for:

- running your bank and savings accounts
- making or selling investments
- paying your bills
- buying or selling your house

How to complete this form

PLEASE WRITE IN CAPITAL LETTERS USING A BLACK PEN

Mark your choice with an X

If you make a mistake, fill in the box and then mark the correct choice with an X

Don't use correction fluid. Cross out mistakes and rewrite nearby.
Everyone involved in each section must initial each change.

Making an LPA online is simpler, clearer and faster

Our smart online form gives you just the right amount of help exactly when you need it: www.gov.uk/power-of-attorney

**Before
you start...**

This form is also available in Welsh. Call the helpline on 0300 456 0300.

The people involved in your LPA

Helpline
0300 456 0300 

You'll find it easier to make an LPA if you first choose the people you want to help you. **Note their names here now** so you can refer back later.



People you must have to make an LPA

Donor

If you are filling this form in for yourself, you are the donor. If you are filling this in for a friend or relative, they are the donor.

Attorneys

Attorneys are the people you pick to make decisions for you. They don't need legal training.

They should be people you trust and know well; for example, your husband, wife, partner, adult children or good friends.

Choose one attorney or more. If you have a lot, they might find it hard to make decisions together.

Certificate provider

You need someone to confirm that no one is forcing you to make an LPA and you understand what you are doing. This is your 'certificate provider'. They must either:

- have relevant professional skills, such as a doctor or lawyer
- have known you well for at least two years, such as a friend or colleague

Some people can't be a certificate provider. See the list in the Guide, part A10.

Witnesses

You can't witness your attorneys' signatures and they can't witness yours. Anyone else over 18 years old can be a witness.

People you might want to include in your LPA

Replacement attorneys

You don't have to appoint replacement attorneys but they help protect your LPA. Without them, your LPA might not work if one of your original attorneys stops acting for you.

People to notify

'People to notify' add security. They can raise concerns about your LPA before it's registered – for example, if they think you are under pressure to make the LPA.



Office of the
Public Guardian

Helpline
0300 456 0300



Lasting power of attorney for property and financial affairs

Section 1 The donor

You are appointing other people to make decisions on your behalf.
You are 'the donor'.

Restrictions – you must be at least 18 years old and be able to understand and make decisions for yourself (called 'mental capacity').

Title First names

--	--

Last name

--

Any other names you're known by (optional – eg your married name)

--

Date of birth

--	--	--	--	--	--	--	--

Day

Month

Year

Address

Postcode

--

Email address (optional)

--

For OPG office use only

LPA registration date

--	--	--	--	--	--	--	--

Day

Month

Year

OPG reference number

--



Help?

For help with this section, see the Guide, part A1.

If you are filling this in for a friend or relative and they can no longer make decisions independently, they can't make an LPA. See the Guide 'Before you start' for more information.



Only valid with the official stamp here.

LP1F Property and financial
affairs (07.15)

Section 2 The attorneys

Helpline
0300 456 0300



The people you choose to make decisions for you are called your 'attorneys'. Your attorneys don't need special legal knowledge or training. They should be people you trust and know well. Common choices include your husband, wife or partner, son or daughter, or your best friend.

You need at least one attorney, but you can have more.

You'll also be able to choose 'replacement attorneys' in section 4. They can step in if one of the attorneys you appoint here can no longer act for you.

To appoint a trust corporation, fill in the first attorney space and tick the box in that section. They must sign Continuation sheet 4. For more about trust corporations, see the Guide, part A2.



For help with this section, see the Guide, part A2.

Restrictions – Attorneys must be at least 18 years old and must have mental capacity to make decisions. They must not be bankrupt or subject to a debt relief order.

Title First names

--	--

Last name (or trust corporation name)

--

Date of birth

Day	Month	Year					

Address

Postcode

--

Email address (optional)

--

Title First names

--	--

Last name

--

Date of birth

Day	Month	Year					

Address

Postcode

--

Email address (optional)

--

This attorney is a trust corporation.

Only valid with the official stamp here.

LPIF Property and financial
affairs (07.15)

Section 2 – continued

Helpline
0300 456 0300



Title First names

Last name

Date of birth
Day Month Year

Address

Postcode

Email address (optional)

Title First names

Last name

Date of birth
Day Month Year

Address

Postcode

Email address (optional)

More attorneys – I want to appoint more than 4 attorneys. Use Continuation sheet 1.

Only valid with the official stamp here.

LPIF Property and financial
affairs (07.15)

Section 3

How should your attorneys make decisions?

You need to choose whether your attorneys can make decisions on their own or must agree some or all decisions unanimously.

Whatever you choose, they must always act in your best interests.

I only appointed one attorney (turn to section 4)

How do you want your attorneys to work together? (tick one only)

Jointly and severally

Attorneys can make decisions on their own or together. Most people choose this option because it's the most practical. Attorneys can get together to make important decisions if they wish, but can make simple or urgent decisions on their own. It's up to the attorneys to choose when they act together or alone. It also means that if one of the attorneys dies or can no longer act, your LPA will still work.

If one attorney makes a decision, it has the same effect as if all the attorneys made that decision.

Jointly

Attorneys must agree unanimously on every decision, however big or small. Remember, some simple decisions could be delayed because it takes time to get the attorneys together. If your attorneys can't agree a decision, then they can only make that decision by going to court.

Be careful – if one attorney dies or can no longer act, all your attorneys become unable to act. This is because the law says a group appointed 'jointly' is a single unit. Your LPA will stop working unless you appoint at least one replacement attorney (in section 4).

Jointly for some decisions, jointly and severally for other decisions

Attorneys must agree unanimously on some decisions, but can make others on their own. If you choose this option, you must list the decisions your attorneys should make jointly and agree unanimously on Continuation sheet 2. The wording you use is important. There are examples in the Guide, part A3.

Be careful – if one attorney dies or can no longer act, none of your attorneys will be able to make any of the decisions you've said should be made jointly. Your LPA will stop working for those decisions unless you appoint at least one replacement attorney (in section 4). Your original attorneys will still be able to make any of the other decisions alongside your replacement attorneys.

Helpline
0300 456 0300



For help with this section, see the Guide, part A3.



If you choose 'jointly for some decisions...', you may want to take legal advice, particularly if the examples in part A3 of the the Guide, don't match your needs.

Section 4

Replacement attorneys

Helpline
0300 456 0300



This section is optional, but we recommend you consider it

Replacement attorneys are a backup in case one of your original attorneys can't make decisions for you any more.

To appoint a trust corporation, fill in the first attorney space below and tick the box in that section. They must sign Continuation sheet 4.

Reasons replacement attorneys step in – if one of your original attorneys dies, loses capacity, no longer wants to be your attorney, becomes bankrupt or subject to a debt relief order or is no longer legally your husband, wife or civil partner.

Restrictions – replacement attorneys must be at least 18 years old and have mental capacity to make decisions. They must not be bankrupt or subject to a debt relief order.



For help with this section, see the Guide, part A4.

Title	First names
<input type="text"/>	<input type="text"/>
Last name (or trust corporation name)	
<input type="text"/>	
Date of birth	
<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Day	Month Year
Address	
<input type="text"/>	
<input type="text"/>	
<input type="text"/>	
Postcode	<input type="text"/>

Title	First names
<input type="text"/>	<input type="text"/>
Last name	
<input type="text"/>	
Date of birth	
<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Day	Month Year
Address	
<input type="text"/>	
<input type="text"/>	
<input type="text"/>	
Postcode	<input type="text"/>

This attorney is a trust corporation.

More replacements – I want to appoint more than two replacements. Use Continuation sheet 1.

When and how your replacement attorneys can act

Replacement attorneys usually step in when one of your **original** attorneys stops acting for you. If there's more than one **replacement** attorney, they will all step in at once. If they **fully** replace your original attorney(s) at once, they will usually act jointly. You can change some aspects of this, but most people don't. See the Guide, part A4.



You should consider taking legal advice if you want to change when or how your replacement attorneys act.

I want to change when or how my attorneys can act (optional). Use Continuation sheet 2.

Only valid with the official stamp here.

LP1F Property and financial
affairs (07.15)

Section 5

When can your attorneys make decisions?

You can allow your attorneys to make decisions:

- as soon as the LPA has been registered by the Office of the Public Guardian
- only when you don't have mental capacity

While you have mental capacity you will be in control of all decisions affecting you. If you choose the first option, your attorneys can only make decisions on your behalf if you allow them to. They are responsible to you for any decisions you let them make.

Your attorneys must always act in your best interests.

When do you want your attorneys to be able to make decisions?

(mark one only)

- As soon as my LPA has been registered
(and also when I don't have mental capacity)**

Most people choose this option because it is the most practical.

While you still have mental capacity, your attorneys can only act **with your consent**. If you later lose capacity, they can continue to act on your behalf for all decisions covered by this LPA.

This option is useful if you are able to make your own decisions but there's another reason you want your attorneys to help you – for example, if you're away on holiday, or if you have a physical condition that makes it difficult to visit the bank, talk on the phone or sign documents.

- Only when I don't have mental capacity**

Be careful – this can make your LPA a lot less useful. Your attorneys might be asked to prove you do not have mental capacity each time they try to use this LPA.

Helpline
0300 456 0300



For help with this section, see the Guide, part A5.

Only valid with the official stamp here.

LP1F Property and financial
affairs (07.15)

Section 6

People to notify when the LPA is registered

Helpline
0300 456 0300



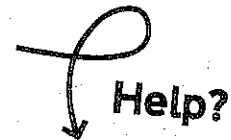
This section is optional

You can let people know that you're going to register your LPA. They can raise any concerns they have about the LPA – for example, if there was any pressure or fraud in making it.

When the LPA is registered, the person applying to register (you or one of your attorneys) must send a notice to each 'person to notify'.

You can't put your attorneys or replacement attorneys here.

People to notify can object to the LPA, but only for certain reasons (listed in the notification form LP3). After that, they are no longer involved in the LPA. Choose people who care about your best interests and who would be willing to speak up if they were concerned.



For help with this section, see the Guide, part A6.

Title	First names
<input type="text"/>	<input type="text"/>
Last name	
<input type="text"/>	
Address	
<input type="text"/>	
<input type="text"/>	
<input type="text"/>	
Postcode	<input type="text"/>

Title	First names
<input type="text"/>	<input type="text"/>
Last name	
<input type="text"/>	
Address	
<input type="text"/>	
<input type="text"/>	
<input type="text"/>	
Postcode	<input type="text"/>

Title	First names
<input type="text"/>	<input type="text"/>
Last name	
<input type="text"/>	
Address	
<input type="text"/>	
<input type="text"/>	
<input type="text"/>	
Postcode	<input type="text"/>

Title	First names
<input type="text"/>	<input type="text"/>
Last name	
<input type="text"/>	
Address	
<input type="text"/>	
<input type="text"/>	
<input type="text"/>	
Postcode	<input type="text"/>

I want to appoint another person to notify (maximum is 5) – use Continuation sheet 1.

Only valid with the official stamp here.

LP1F Property and financial
affairs (07.15)

Section 7

Preferences and instructions

Helpline
0300 456 0300



This section is optional

You can tell your attorneys how you'd **prefer** them to make decisions, or give them specific **instructions** which they must follow when making decisions.

Most people leave this page blank – you can just talk to your attorneys so they understand how you want them to make decisions for you.



Help?

For help with this section, see the Guide, part A7.

Preferences

Your attorneys don't have to follow your preferences but they should keep them in mind. For examples of preferences, see the Guide, part A7.

Preferences – use words like 'prefer' and 'would like'

I need more space – use Continuation sheet 2.

Instructions

Your attorneys will have to follow your instructions exactly. For examples of instructions, see the Guide, part A7.

Be careful – if you give instructions that are not legally correct they would have to be removed before your LPA could be registered.

Instructions – use words like 'must' and 'have to'



If you want to give instructions, you may want to take legal advice.

I need more space – use Continuation sheet 2.

Only valid with the official stamp here.

LP1F Property and financial
affairs (07.15)

Section 8

Your legal rights and responsibilities

Helpline
0300 456 0300



! Everyone signing the LPA must read this information

In sections 9 to 11, you, the certificate provider, all your attorneys and your replacement attorneys must sign this lasting power of attorney to form a legal agreement between you (a deed).

By signing this lasting power of attorney, you (the donor) are appointing people (attorneys) to make decisions for you.

LPAs are governed by the Mental Capacity Act 2005 (MCA), regulations made under it and the MCA Code of Practice. Attorneys must have regard to these documents. The Code of Practice is available from www.gov.uk/opg/mca-code or from The Stationery Office.

Your attorneys must follow the principles of the Mental Capacity Act:

1. Your attorneys must assume that you can make your own decisions unless it is established that you cannot do so.
2. Your attorneys must help you to make as many of your own decisions as you can. They must take all practical steps to help you to make a decision. They can only treat you as unable to make a decision if they have not succeeded in helping you make a decision through those steps.
3. Your attorneys must not treat you as unable to make a decision simply because you make an unwise decision.
4. Your attorneys must act and make decisions in your best interests when you are unable to make a decision.
5. Before your attorneys make a decision or act for you, they must consider whether they can make the decision or act in a way that is less restrictive of your rights and freedom but still achieves the purpose.

Your attorneys must always act in your best interests. This is explained in the Application guide, part A8, and defined in the MCA Code of Practice.

Before this LPA can be used:

- it must be registered by the Office of the Public Guardian (OPG)
- it may be limited to when you don't have mental capacity, according to your choice in section 5

Cancelling your LPA: You can cancel this LPA at any time, as long as you have mental capacity to do so. It doesn't matter if the LPA has been registered or not. For more information, see the Guide, part D.

Your will and your LPA: Your attorneys cannot use this LPA to change your will. This LPA will expire when you die. Your attorneys must then send the registered LPA, any certified copies and a copy of your death certificate to the Office of the Public Guardian.

Data protection: For information about how OPG uses your personal data, see the Guide, part D.



Help?

For help with this section, see the Guide, part A8.

Only valid with the official stamp here.

LP1F Property and financial
affairs (07.15)

Section 9

Signature: donor

Helpline
0300 456 0300



By signing on this page I confirm all of the following:

- I have read this lasting power of attorney (LPA) including section 8 'Your legal rights and responsibilities', or I have had it read to me
- I appoint and give my attorneys authority to make decisions about my property and financial affairs, including when I cannot act for myself because I lack mental capacity, subject to the terms of this LPA and to the provisions of the Mental Capacity Act 2005
- I have either appointed people to notify (in section 6) or I have chosen not to notify anyone when the LPA is registered
- I agree to the information I've provided being used by the Office of the Public Guardian in carrying out its duties



Be careful

Sign this page (and any continuation sheets) before anyone signs sections 10 and 11.

Donor

Signed (or marked) by the person giving this lasting power of attorney and delivered as a deed.

Signature or mark

Date signed or marked

--	--	--	--	--	--	--	--	--	--

Day Month Year

If you have used Continuation sheets 1 or 2 you must sign and date each continuation sheet at the same time as you sign this page.

If you can't sign this LPA you can make a mark instead. If you can't sign or make a mark you can instruct someone else to sign for you, using Continuation sheet 3.

Witness

The witness must not be an attorney or replacement attorney appointed under this LPA, and must be aged 18 or over.

Signature or mark

Full name of witness

Address

Postcode



Help?

For help with this section, see the Guide, part A9.

Only valid with the official stamp here.

LP1F Property and financial affairs (07.15)

Section 10

Signature: certificate provider

Helpline
0300 456 0300

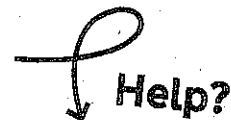


! Only sign this section after the donor has signed section 9

The 'certificate provider' signs to confirm they've discussed the lasting power of attorney (LPA) with the donor, that the donor understands what they're doing and that nobody is forcing them to do it. The 'certificate provider' should be either:

- someone who has known the donor personally for at least 2 years, such as a friend, neighbour, colleague or former colleague
- someone with relevant professional skills, such as the donor's GP, a healthcare professional or a solicitor

A certificate provider **can't** be one of the attorneys.



Help?

For help with this section, see the Guide, part A10.

Certificate provider's statement

I certify that, as far as I'm aware, at the time of signing section 9:

- the donor understood the purpose of this LPA and the scope of the authority conferred under it
- no fraud or undue pressure is being used to induce the donor to create this LPA
- there is nothing else which would prevent this LPA from being created by the completion of this instrument

By signing this section I confirm that:

- I am aged 18 or over
- I have read this LPA, including section 8 'Your legal rights and responsibilities'
- there is no restriction on my acting as a certificate provider
- the donor has chosen me as someone who has known them personally for at least 2 years **OR**
- the donor has chosen me as a person with relevant professional skills and expertise

Restrictions – the certificate provider must not be:

- an attorney or replacement attorney named in this LPA or any other LPA or enduring power of attorney for the donor
- a member of the donor's family or of one of the attorneys' families, including husbands, wives, civil partners, in-laws and step-relatives
- an unmarried partner, boyfriend or girlfriend of either the donor or one of the attorneys (whether or not they live at the same address)
- the donor's or an attorney's business partner
- the donor's or an attorney's employee
- an owner, manager, director or employee of a care home where the donor lives

Certificate provider

Title First names

Last name

Address

Postcode

Signature or mark

Date signed or marked

Day

Month

Year

Only valid with the official stamp here.

LPIF Property and financial
affairs (07:15)

Section 11

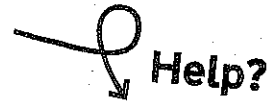
Signature: attorney or replacement

Helpline
0300 456 0300



! Only sign this section after the certificate provider has signed section 10

All the attorneys and replacement attorneys need to sign.
There are 4 copies of this page – make more copies if you need to.



Help?
For help with this section, see the Guide, part A11.

By signing this section I understand and confirm all of the following:

- I am aged 18 or over
- I have read this lasting power of attorney (LPA) including section 8 'Your legal rights and responsibilities', or I have had it read to me
- I have a duty to act based on the principles of the Mental Capacity Act 2005 and to have regard to the Mental Capacity Act Code of Practice
- I must make decisions and act in the best interests of the donor
- I must take into account any instructions or preferences set out in this LPA
- I can make decisions and act only when this LPA has been registered and at the time indicated in section 5 of this LPA

Further statement by a replacement attorney: I understand that I have the authority to act under this LPA only after an original attorney's appointment is terminated. I must notify the Public Guardian if this happens.

Attorney or replacement attorney

Signed (or marked) by the attorney or replacement attorney and delivered as a deed.

Signature or mark

Date signed or marked

--	--	--	--	--	--

Day Month Year

Title First names

--	--

Last name

Witness

The witness must not be the donor of this LPA, and must be aged 18 or over.

Signature or mark

Full names of witness

Address

Postcode

Only valid with the official stamp here.

LP1F Property and financial affairs (07.15)

Section 11

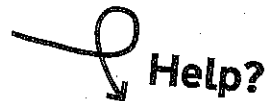
Signature: attorney or replacement

Helpline
0300 456 0300



! Only sign this section after the certificate provider has signed section 10

All the attorneys and replacement attorneys need to sign.
There are 4 copies of this page – make more copies if you need to.



Help?

For help with this section, see the Guide, part A11.

By signing this section I understand and confirm all of the following:

- I am aged 18 or over
- I have read this lasting power of attorney (LPA) including section 8 'Your legal rights and responsibilities', or I have had it read to me
- I have a duty to act based on the principles of the Mental Capacity Act 2005 and to have regard to the Mental Capacity Act Code of Practice
- I must make decisions and act in the best interests of the donor
- I must take into account any instructions or preferences set out in this LPA
- I can make decisions and act only when this LPA has been registered and at the time indicated in section 5 of this LPA

Further statement by a replacement attorney: I understand that I have the authority to act under this LPA only after an original attorney's appointment is terminated. I must notify the Public Guardian if this happens.

Attorney or replacement attorney

Signed (or marked) by the attorney or replacement attorney and delivered as a deed.

Signature or mark

Date signed or marked

Day Month Year

Title First names

Last name

Witness

The witness must not be the donor of this LPA, and must be aged 18 or over.

Signature or mark

Full names of witness

Address

Postcode

Only valid with the official stamp here.

LPIF Property and financial affairs (07.15)

Section 11

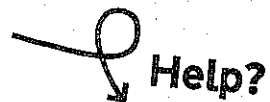
Signature: attorney or replacement

Helpline
0300 456 0300



! Only sign this section after the certificate provider has signed section 10

All the attorneys and replacement attorneys need to sign.
There are 4 copies of this page – make more copies if you need to.



Help?

For help with this section, see the Guide, part A11.

By signing this section I understand and confirm all of the following:

- I am aged 18 or over
- I have read this lasting power of attorney (LPA) including section 8 'Your legal rights and responsibilities', or I have had it read to me
- I have a duty to act based on the principles of the Mental Capacity Act 2005 and to have regard to the Mental Capacity Act Code of Practice
- I must make decisions and act in the best interests of the donor
- I must take into account any instructions or preferences set out in this LPA
- I can make decisions and act only when this LPA has been registered and at the time indicated in section 5 of this LPA

Further statement by a replacement attorney: I understand that I have the authority to act under this LPA only after an original attorney's appointment is terminated. I must notify the Public Guardian if this happens.

Attorney or replacement attorney

Signed (or marked) by the attorney or replacement attorney and delivered as a deed.

Signature or mark

Date signed or marked

--	--	--	--	--	--	--	--

Day Month Year

Title First names

--	--

Last name

Witness

The witness must not be the donor of this LPA, and must be aged 18 or over.

Signature or mark

Full names of witness

Address

Postcode

Only valid with the official stamp here.

LP1F Property and financial affairs (07.15)

Section 11

Signature: attorney or replacement

Helpline
0300 456 0300



! Only sign this section after the certificate provider has signed section 10

All the attorneys and replacement attorneys need to sign.
There are 4 copies of this page – make more copies if you need to.



For help with this section, see the Guide, part A11.

By signing this section I understand and confirm all of the following:

- I am aged 18 or over
- I have read this lasting power of attorney (LPA) including section 8 'Your legal rights and responsibilities', or I have had it read to me
- I have a duty to act based on the principles of the Mental Capacity Act 2005 and to have regard to the Mental Capacity Act Code of Practice
- I must make decisions and act in the best interests of the donor
- I must take into account any instructions or preferences set out in this LPA
- I can make decisions and act only when this LPA has been registered and at the time indicated in section 5 of this LPA

Further statement by a replacement attorney: I understand that I have the authority to act under this LPA only after an original attorney's appointment is terminated. I must notify the Public Guardian if this happens.

Attorney or replacement attorney

Signed (or marked) by the attorney or replacement attorney and delivered as a deed.

Signature or mark

Date signed or marked

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
----------------------	----------------------	----------------------	----------------------	----------------------	----------------------

Day Month Year

Title First names

<input type="text"/>	<input type="text"/>
----------------------	----------------------

Last name

Witness

The witness must not be the donor of this LPA, and must be aged 18 or over.

Signature or mark

Full names of witness

Address

Postcode

Only valid with the official stamp here.

LP1F Property and financial
affairs (07.15)

Helpline
0300 456 0300



Now register your LPA

Before the LPA can be used, it **must** be registered by the Office of the Public Guardian (OPG). Continue filling in this form to register the LPA. See part B of the Guide.

People to notify

If there are any 'people to notify' listed in section 6, you must notify them that you are registering the LPA now. See part C of the Guide.

Fill in and send each of them a copy of the form to notify people – LP3.

When you sign section 15 of this form, you are confirming that you've sent forms to the 'people to notify'.

Register now

You do not have to register immediately, but it's a good idea in case you've made any mistakes. If you delay until after the donor loses mental capacity, it will be impossible to fix any errors. This could make the whole LPA invalid and it will not be possible to register or use it.

Register your lasting power of attorney

Helpline
0300 456 0300

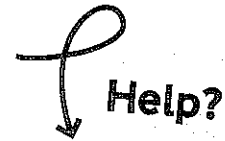


Section 12 The applicant

You can only apply to register if you are either the donor or attorney(s) for this LPA. The donor and attorney(s) should not apply together.

Who is applying to register the LPA? (tick one only)

- Donor** – the donor needs to sign section 15
- Attorney(s)** – If the attorneys were appointed jointly (in section 3) then they **all** need to sign section 15. Otherwise, only one of the attorneys needs to sign



Help?

For help with this section, see the Guide, part B2.

Write the name and date of birth for each attorney that is applying to register the LPA. Don't include any attorneys who are not applying.

Title First names

Last name

Date of birth
Day Month Year

Title First names

Last name

Date of birth
Day Month Year

Title First names

Last name

Date of birth
Day Month Year

Title First names

Last name

Date of birth
Day Month Year

Section 13

Who do you want to receive the LPA?

We need to know who to send the LPA to once it is registered. We might also need to contact someone with questions about the application.

We already have the addresses of the donor and attorneys, so you don't have to repeat any of those here, unless they have changed.

Who would you like to receive the LPA and any correspondence?

- The donor**
- An attorney** (write name below)
- Other** (write name and address below)

Title First names

--	--

Last name

--

Company (optional)

--

Address

Postcode

--

How would the person above prefer to be contacted?

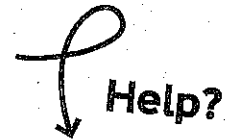
You can choose more than one.

- Post**
- Phone**

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--
- Email**

--
- Welsh** (we will write to the person in Welsh)

Helpline
0300 456 0300



For help with this section, see the Guide, part B3.

Section 14

Application fee

Helpline
0300 456 0300



There's a fee for registering a lasting power of attorney – the amount is shown on the cover sheet of this form or on form LPA120.

The fee changes from time to time. You can check you are paying the correct amount at www.gov.uk/power-of-attorney/how-much-it-costs or call 0300 456 0300. The Office of the Public Guardian can't register your LPA until you have paid the fee.

How would you like to pay?

Card For security, **don't** write your credit or debit card details here. We'll contact you to process the payment.

Your phone number

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Cheque Enclose a cheque with your application.



For help with this section, see the Guide, part B4.

Reduced application fee

If the donor has a low income, you may not have to pay the full amount. See the Guide, part B4 for details.

I want to apply to pay a reduced fee
You'll need to fill in form LPA120 and include it with your application. You'll also **need to send proof** that the donor is eligible to pay a reduced fee.

Are you making a repeat application?

If you've already applied to register an LPA and the Office of the Public Guardian said that it was not possible to register it, you can apply again within 3 months and pay a reduced fee.

I'm making a repeat application

Case number

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For OPG office use only

Payment reference											
<input type="text"/>											
Payment date			Amount								
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>								
Day	Month	Year									

Section 15 Signature

Helpline
0300 456 0300



! Do not sign this section until after sections 9, 10 and 11 have been signed.



The person applying to register the LPA (see section 12) must sign and date this section. This is either the donor or attorney(s) but not both together.

If the **attorneys** are applying to register the LPA and they were appointed to act **jointly** (in section 3), they must all sign.

By signing this section I confirm the following:

- I apply to register the LPA that accompanies this application
- I have informed 'people to notify' named in section 6 of the LPA (if any) of my intention to register the LPA
- I certify that the information in this form is correct to the best of my knowledge and belief



Help?
For help with this section, see the Guide, part B5.

Signature or mark

Date signed

--	--	--	--	--	--

Day Month Year

Signature or mark

Date signed

--	--	--	--	--	--

Day Month Year

Signature or mark

Date signed

--	--	--	--	--	--

Day Month Year

Signature or mark

Date signed

--	--	--	--	--	--

Day Month Year

If more than 4 attorneys need to sign, make copies of this page.

Check your lasting power of attorney

You don't have to use this checklist, but it'll help you make sure you've completed your LPA correctly.

Helpline
0300 456 0300



- The donor filled in sections 1 to 7.
- The donor signed section 9 in the presence of a witness. The donor also signed any copies of continuation sheets 1 and 2 that were used, on the same date as signing section 9.
- The certificate provider signed section 10.
- All the attorneys and replacement attorneys signed section 11, in the presence of witness(es).
- Sections 9, 10 and 11 were signed in order. Section 9 must have been signed first, then section 10, then section 11. They can be dated the same day or different days.
- The donor or an attorney completed sections 12 to 15. If the attorneys are applying and were appointed 'jointly' (section 3), they have all signed section 15 of this form.
- I've paid the application fee or applied for a reduced fee. If I've applied for a reduced fee, I've included the required evidence and completed form LPA120A.
- If there were any people to notify in section 6, I've notified them using form LP3.
- I've not left out any of the pages of the LPA, even the ones where I didn't write anything or there were no boxes to fill in.

Send to:

Office of the Public Guardian
PO Box 16185
Birmingham B2 2WH