



INSTRUCTIONS FOR ENDURING POWERS OF ATTORNEY (EPOA) - PERSONAL CARE AND WELFARE

This document is for information gathering purposes only and does not constitute a legally binding document.

We will prepare both Property and Personal Care and Welfare EPOA's for you on your behalf, based on these instructions.

This form is solely for the Personal Care and Welfare EPOA.

Once prepared, your Enduring Powers of Attorney are binding once they are signed by you and your attorney (including any successor attorney/s) in the presence of a witness. For the donor this must be a lawyer, an authorised legal executive, or an authorised officer or employee of a trustee corporation who also sign the documents and complete a certificate.

NOTE: These will only come into effect if a MEDICAL PROFESSIONAL declares mental incapacity.

ARE THESE NEW ENDURING POWERS OF ATTORNEY?	☐ YES ☐ NO
IF NO, WHERE ARE YOUR CURRENT, ORIGINAL EPOA's HELD?	

NAME (your full legal name): You are the DONOR*	
ADDRESS:	
TELEPHONE NUMBER/S:	
EMAIL ADDRESS/ES:	
DATE OF BIRTH:	
OCCUPATION:	
NAME OF ATTORNEY** (Please include their relationship to you)	

ATTORNEYS CONTACT DETAILS (please include their ADDRESS, EMAIL ADDRESS AND CONTACT NUMBER)	
SUCCESSOR ATTORNEY/S*** (Who would take over for the attorney/s if they could not perform the task) (Please include their relationship to you)	
SUCCESSOR ATTORNEY/S CONTACT DETAILS (please include their ADDRESS, EMAIL ADDRESS AND CONTACT NUMBER)	
PEOPLE THAT NEED TO BE CONSULTED WITH ON ANY DECISIONS MADE (Optional) (please include their ADDRESS, EMAIL ADDRESS AND CONTACT NUMBER)	
PEOPLE THAT NEED INFORMATION PROVIDED TO THEM ABOUT ANY DECISIONS MADE (Optional) (please include their ADDRESS, EMAIL ADDRESS AND CONTACT NUMBER)	
OTHER OPTIONS Mark the box/or beside the box if you would like these options NOTE: If this box is unmarked the matter will not be included in the EPOA	☐ Are there restrictions on what matters they can act on – if yes what restrictions?

***Donor** – The individual the EPOA relates to/involves.

****Attorney** – The appointed individual that will be tasked with making decisions on your behalf when you are unable to make them for yourself.

*** **Successor Attorney** – The appointed individual that will be tasked with making decisions on your behalf when both you and your attorney are unable to make them for yourself.