

INSTRUCTION SHEET FOR AN ENDURING POWER OF ATTORNEY

YOUR DETAILS	
Full Name:	
Address:	
Occupation:	
YOUR ATTORNEY'S DETAILS (Maximum of 2 attorneys)	
1.	Full Name:
	Address:
	Occupation:
2.	Full Name:
	Address:
	Occupation:
If more than one attorney specify 🔲 jointly and severally (tick box).	
YOUR ALTERNATE ATTORNEY'S DETAILS IF FIRST ATTORNEY'S ARE UNABLE TO ACT (Maximum 2	
attorneys).	
1.	Full Name:
	Address:
	Occupation:
2.	Full Name:
	Address:
	Occupation:

If more than one attorney specify **jointly and severally** (*tick box*).

TYPE OF ENDURING POWER OF ATTORNEY

It is our common practice to prepare an Enduring Powers of Attorney which are effective immediately and indefinitely until revoked or upon your death. If you do not want the Enduring Power of Attorney to take effect immediately, then tick the box below:

> Suite 11, 6 Leigh Street, Burswood 6100, WA PO Box 4333, Victoria Park 6100, WA TELEPHONE: 9361 0701 MOBILE: 0426 817572 FACSIMILE: 9361 0703 EMAIL: enquiries@adamsonlawyers.com.au www.adamsonlawyers.com.au DIRECTOR: 0 Willett ABN: 82162 414 459 ACN: 162 414 459



For the Enduring Power of Attorney to take effect only during the period which the State
Administrative Tribunal (" SAT ") declares that you do not have legal capacity. This will require your
Attorney(s) to make an application to the SAT for a declaration as to your legal incapacity.
For the Enduring Power of Attorney to take effect between a certain period of time, please specify
the periods fromtoto

CONDITIONS OR RESTRICTIONS ON ENDURING POWER OF ATTORNEY

Specify any conditions or restrictions here (usually none):

REGISTRATION OF ENDURING POWER OF ATTORNEY

If you wish us to register the Enduring Power of Attorney at Landgate to enable your attorney(s) to deal with land owned by you, tick here: the registration cost is as per Landgate charges from time to time.

SIGNING ENDURING POWER OF ATTORNEY

I wish to make an appointment with Adamson & Adamson Lawyers to sign my Enduring Power of Attorney.

My contact numbers are: (H)_____ (W)_____ (M)____: or

Please send my Enduring Power of Attorney to me together with an instruction sheet on how to sign it.