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Office of the
Public Guardian

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REGISTERED

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Lasting power of attorney for health and welfare

About this lasting power of attorney

This lasting power of attorney allows you to choose people to act on your behalf (as an attorney) and make decisions about your **health and personal welfare**, when you are unable to make decisions for yourself. This can include decisions about your healthcare and medical treatment, decisions about where you live and day-to-day decisions about your personal welfare, such as your diet, dress or daily routine.

If you also want someone to make decisions about your **property and financial affairs**, you will need a separate form (downloadable from our website or call 0300 456 0300).

Who can fill it in?

Anyone aged 18 or over, who has the mental capacity to do so.

Before you fill in the lasting power of attorney:

1. Please read the guidance available at gov.uk/power-of-attorney or by calling **0300 456 0300**. See, for example, the **Lasting power of attorney creation pack** or other relevant guidance booklets which are all available online or by post.
2. Make sure you understand the purpose of this lasting power of attorney and the extent of the authority you are giving your attorneys.
3. Read the separate **Information sheet** to understand all the people involved, and how the three parts of the form should be filled in.
4. Make sure you, your certificate provider(s), and your attorney(s) have read the section on page 2 called **Information you must read before filling in their relevant part**.



This lasting power of attorney could be rejected at registration if it contains any errors.

Checklist

See the information sheet for guidance on all the people involved

Part A: about you, the attorneys you are appointing, and people to be told

How many **attorneys** are you appointing? *Write in words.*

Two

How many **replacement attorneys** are you appointing? *Write in words or write 'None' if this does not apply.*

None

How many **people to be told** are you choosing? *Write in words from 'None' to 'five'. If 'None' you must have two certificate providers in part B.*

Three

Part B: about your certificate providers

How many **certificate providers** do you have? *(Tick one box)*

One OR Two

If you have used any continuation sheets each one must be signed and dated.

Attached to the back of this lasting power of attorney are:

(Write the number of each)

continuation sheet A1

continuation sheet A2

continuation sheet A3:HW 2 pages

continuation sheet B

Total number of continuation sheets

Helpline

0300 456 0300

gov.uk/power-of-attorney

Valid only with Office of the Public Guardian stamp

