

**AMES KENT**

Est. 1840

## **Lasting Power of Attorney Questionnaire**

To help us prepare LPAs for you, please complete as fully as possible the following questionnaire.

**This form is designed to be completed on a desktop device. If you have a suitable mobile app such as Adobe Reader or similar, then it will be possible to complete and save the form on a mobile device.**

We recognise that the form is detailed, but such information is required to ensure that we fully understand and comply with your wishes. If, however, you are unable to answer any of the questions do not worry, simply complete the form in as much detail as possible.

You can save this file at any time and return to it later (your data will not be lost).

Once you have completed the form, please return it to us by saving the file and then attaching it to an email before sending it to [katherine.oakes@ames-kent.co.uk](mailto:katherine.oakes@ames-kent.co.uk)

Thank you

## Personal and family details

### 1. Your details

Title

Full Name

Address

Email Address

Telephone (daytime)

Telephone (home)

Occupation

Date of Birth

Country of Residence

Nationality

Status

### 2. Your spouse or partner

2.1 Title

2.2 Full Name

2.3 Address  
(if different from yours)

2.4 Date of Birth

2.5 If not married/in a civil partnership, do you  
intend to get married/enter into a civil  
partnership?

If yes, please give details

2.6 If you have been married previously how did  
that marriage end?

Lasting Power of Attorney Health and Care

Lasting Power of Attorney Financial Decision

Advance Decision

### 3. Attorneys

Do you want to appoint your spouse/partner as an attorney?

**Attorney One**

Title

Full Name

Address

Email Address

Relationship to you?

Has confirmed willingness to act as attorney?

Are they to be an attorney or replacement?

**Attorney Two**

Title

Full Name

Address

Email Address

Relationship to you?

Has confirmed willingness to act as attorney?

Are they to be an attorney or replacement?

**Attorney Three**

Title

Full Name

Address

Email Address

Relationship to you?

Has confirmed willingness to act as attorney?

Are they to be an attorney or replacement?

Note: if you wish to appoint more attorneys please add the relevant details in section 4 - Additional Information.

Do you want to include any precedent clauses?

If yes, please write the paragraph numbers in section 4 - Additional Information.

How do you want your attorney to act?

Joint means they must make decisions unanimously. If they cannot agree then a decision cannot be made.

We always recommend joint and several.

Date of completion of this form

Completed by

#### 4. Additional Information

#### **NEXT STEPS:**

- Save a copy of your completed form
- Attach the form to an email and send to [katherine.oakes@ames-kent.co.uk](mailto:katherine.oakes@ames-kent.co.uk)

Thank you.