



Enduring Power of Attorney Workflow

ENDURING POWER OF ATTORNEY WORKFLOW

Action	Action Description	Documents	Next
EPA01	Initial Instructions from Client and Letter to Doctor	EPA01B – Letter to Client with Fee Note EPA01C – Letter to Doctor to sign Certificate EPA01E – Doctor Certificate	EPA02 – 14 Days
EPA02	Reminder – have we heard from Doctor?	EPA02A – Reminder letter to doctor	EPA02 – 7 Days EPA05 – 0 Now
EPA05	Prepare EPA documentation on receipt of Doctor's Certificate	EPA04A – Letter to client to make appointment EPA05C – Enduring Power of Attorney Parts A and B EPA05D – Notice of execution of EPA EPA05F – Statement by solicitor EPA05G – Undertaking by attorney EPA05H – Undertaking by back-up attorney	EPA06 – 5 Days
EPA06	Has Client signed? Request new Doctor's Certificate if necessary.	EPA01E – Doctor Certificate EPA07A – Letter to doctor for fresh certificate	EPA07 – 5 Days
EPA07	EPA signed and Doctor's Certificate in date		EPA10 – 0 Now
EPA10	Prepare and serve papers on Attorneys and Notice Parties	EPA10A – Letter to first notice party EPA10B – Letter to first attorney after execution of EPA EPA10C – Letter to back-up attorney after execution of EPA EPA10D – Letter to client after execution of EPA EPA10E – Invoice to client EPA10F – Letter to second notice party EPA10G – Letter to second attorney after execution of EPA	EPA12 – 14 Days
EPA12	Reminder Letter to Attorneys to return Undertakings	EPA05G – Undertaking by attorney EPA12A – Letter reminding first attorney to return undertaking EPA12B – Letter reminding second attorney to return undertaking	EPA12 – 10 Days EPA13 – 0 Now EPA15 – 21 Days
EPA13	Reminder to Client to pay Invoice	EPA13A – Reminder to client re invoice	EPA13 – 30 Days EPA14 – 0 Now EPA15 – 14 Days
EPA14	Letter to Doctor discharging Invoice	EPA14A – Letter to doctor discharging invoice	EPA15 – 14 Days
EPA15	Prepare and swear Affidavit of Service	EPA15A – Affidavit of service of notice of execution on first Notice Party EPA15B – Affidavit of service of notice of execution on second Notice Party	EPA17 – 1 Days
EPA17	Completion – place on EPA register and close file		

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[MAT:Code]/[MAT:FeCode]/[MAT:Secretary]

[DATE:Today]

Private & Confidential

[CNT:Name]

[CNT:Address]

RE: Enduring Power of Attorney

Dear [CNT:Salut]

I refer to the above matter and to your recent visit to my office on the [UDF:DateInstructions] wherein you gave instructions to prepare an Enduring Power of Attorney.

In accordance with the Enduring Power of Attorney you have appointed your [UDF:Atty1RelationClient] [CAN:Name.Attorney#01] of [CAN:AddressSingle.Attorney#01] and [CAN:Name.Attorney#02] of [CAN:AddressSingle.Attorney#02] to look after your affairs if you are to become incapable of doing so in the future

As back up Attorney you have appointed [CAN:Name.BkUpAtty#01] of [CAN:AddressSingle.BkUpAtty#01]

The two people you have appointed as your Notice Parties, i.e. [CAN:Name.NoticePty#01] of [CAN:AddressSingle.NoticePty#01] and [CAN:Name.NoticePty#02] of [CAN:AddressSingle.NoticePty#02] can object to the Court granting such power to the Attorneys [CAN:Name.Attorney#01] and [CAN:Name.Attorney#02] if they think you are capable of managing your own affairs, and this will be taken into account by the Court. Thus, the role of [CAN:Name.NoticePty#01] and [CAN:Name.NoticePty#02] is to protect your interests and in the event that same is necessary, to safeguard against the Attorney gaining control of your affairs if you are still in good health.

In the meantime I enclose herewith draft fee note in respect of fees and outlay for your perusal.

I have today written to [CAN:Name.Doctors#01] and will contact you further once I have received a response from him.

Yours sincerely,

[MAT:FeName]

[SYS:CON:NAME]

DRAFT FEENOTE

[CNT:Name]
-TO-
[SYS:CON:Name]

Re: Estimate of fees for Enduring Power of Attorney

PROFESSIONAL FEES for all work done in relation to the Enduring Power of Attorney, to include taking initial instructions, drafting Enduring Power of Attorney, attending with clients at execution of same, notifying nominees that Donor has made Enduring Power of Attorney, and preparing and completing Affidavits of Service in this regard;

For all the foregoing and for all advice's, consultations and attendance's an inclusive fee of	€350.00
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V.A.T. @ 23%	€80.50
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OUTLAY NOT SUBJECT TO VAT

Estimated Doctors fee for execution of certificate	€50.00
--	---------------

Estimated total	€480.50
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Dated this day of 20

Signed _____
[SYS:CON:Name]
Solicitors
[DIA:Address]

**PLEASE NOTE THIS IS A DRAFT ESTIMATE OF FEES AND A FINAL INVOICE WILL
BE ISSUED ON COMPLETION OF THE ENDURING POWER OF ATTORNEY**

[MAT:Code]/[MAT:FeCode]/[MAT:Secretary]

[DATE:Today]

Private & Confidential

[CAN:Name.Doctors#01]

[CAN:Address.Doctors#01]

Re: [CNT:Name] of [CNT:LinearAddress]
Date of birth: [CNT:DOB18]
Enduring Power of Attorney

Dear [CAN:Salutation.Doctors#01]

I write to you in relation to the above client who is also a patient of yours. [CNT:Name] of [CNT:LinearAddress] has recently contacted me instructing me to prepare an Enduring Power of Attorney.

It is a pre-condition to the preparation of an Enduring Power of Attorney that the client's Medical Practitioner furnish a report confirming that the client has the mental capacity to give the appropriate instructions to [SYS:iif(UDF('ClientPronoun')='HER', 'her', iif(UDF('ClientPronoun')='HIS', 'his', (UDF('ClientPronoun'))))] solicitor. I have enclosed for your convenience the standard Statement by Registered Medical Practitioner and would be grateful, if you see fit, if you would sign same and return to this office at your earliest convenience.

Yours sincerely.

[MAT:FeName]
[SYS:CON:NAME]

STATEMENT BY REGISTERED
MEDICAL PRACTITIONER

I, [CAN:Name.Doctors#01], a registered Medical Practitioner, of [CAN:AddressSingle.Doctors#01], **HEREBY STATE** that in my opinion at the time this document was executed by the donor, [CNT:Name], [SYS:iif(UDF('ClientPronoun')='HIS', 'he', iif(UDF('ClientPronoun')='HER', 'she', 'he/she'))] had mental capacity with the assistance of such explanations as may have been given to the donor, to understand the effect of creating the power.

SIGNED: _____
[CAN:Name.Doctors#01]

DATED:

[MAT:Code]/[MAT:FeCode]/[MAT:Secretary]

[DATE:Today]

.
[CAN:Name.Doctors#01]
[CAN:Address.Doctors#01]

Re: [CNT:Name] of [CNT:LinearAddress]
Date of Birth - [CNT:DOB18]
An Enduring Power of Attorney

Dear [CAN:Salutation.Doctors#01]

I refer to the above matter and to previous communications ending with my letter to you dated the [UDF:CorrespondenceDate]

I note that I have not received a response from you and I would be much obliged if you would revert in early course so that I may proceed with the execution of the Enduring Power of Attorney.

I look forward to hearing from you.

Yours sincerely.

[MAT:FeName]
[SYS:CON:NAME]

[MAT:Code]/[MAT:FeCode]/[MAT:Secretary]

[DATE:Today]

Private & Confidential

[CNT:Name]

[CNT:Address]

RE: Enduring Power of Attorney

Dear [CNT:Salut]

I refer to the above matter and to your recent visit to my office on the [UDF:PrevMeetDate] wherein you gave instructions to prepare an Enduring Power of Attorney.

I have tried contacting you by telephone in order to make an appointment for you to call to see me to execute the Enduring Power of Attorney.

I have been unable to reach you thus far and would be obliged if you would contact me on receipt of this letter with a view to making an appointment.

I await hearing from you and hope that you are keeping well.

Kindest regards

Yours sincerely,

[MAT:FeName]

[SYS:CON:NAME]

FIRST SCHEDULE

Instrument creating Enduring Power of Attorney

Prescribed Form

PART A: EXPLANATORY INFORMATION

{Note: 1. This Part may not be omitted from the instrument.

2. If the enduring power is to relate only to personal care decisions, the format in the Second Schedule should be used}

Notice to donor and attorneys

1. Following is a simplified explanation of what the Powers of Attorney Act 1996 provides. If you need any more guidance you or your advisers will need to look at the Act itself.
2. Do not sign this enduring power unless you understand what it means. IF you are in any doubt you should obtain legal advice.

Effect of creating enduring power: information for donor

3. An enduring power of attorney enables you to choose a person (called an “attorney”) to manage your property and affairs in the event of your becoming mentally incapable of doing so. You may choose one attorney or more than one. If you choose more than one, you must decide whether they are to be able to act:

Jointly (that is, they must all act together and cannot act separately), or

Jointly and severally (that is, they can all act together but they can also act separately if they wish).

In Part B of this document, at the place marked { 1 }, show what you have decided by crossing out or omitting one of the alternatives. IF you do not, the attorneys are deemed to have been appointed to act jointly.

4. If you give your attorney(s) general power in relation to all your property and affairs, they will be able to deal with your money or property and may be able to sell your house.
5. If you do not want your attorney(s) to have such wide powers, you can include any restrictions you like. For example, you can include a restriction that your attorney(s) may not sell your house. Any restrictions you choose must be written or typed at the place marked { 2 } in Part B of this document.
6. You may authorise the attorney(s) to take certain personal care decisions on your behalf, e.g. deciding where you shall live. IF you decide to do so, you should indicate, at the place marked { 3 } in Part B of this document, the particular personal care decisions you want to authorise. You should also name any person you would like to attorney to consult so that the attorney can have regard to that person’s views as to your wishes and feelings and as to what would be in your best interests.

7. Unless you put in a restriction preventing it, your attorney(s) will be able to use any of your money or property to benefit themselves or other people by doing what you yourself might be expected to do to provide for their needs.
8. If you specifically authorise it, your attorney(s) will also be able to use your money to make gifts, but only for reasonable amounts in relation to the value of your money and property and subject to any conditions or restrictions you may impose.
9. You may also appoint an attorney or attorneys to act in the event that the original attorney is unable or unwilling to act. Provision for such an appointment is made at the place marked {4} in Part B of this document.
10. You must give notice of the execution of the enduring power as soon as practicable to at least two persons. None of them may be an attorney under the power. At least one must be the donor's spouse, if living with the donor. If the donor is unmarried, widowed or separated, notification must be given to a child of the donor (if applicable) or otherwise to any relative (i.e. parent, sibling, grandchild, widow/er of child, nephew or niece). You should give the names and addresses of those notified at the place marked {5} in Part B of this document.. The prescribed form of notice is contained in the Third Schedule to the Enduring Powers of Attorney Regulations, 1996.
11. Your attorney(s) can recover the out-of-pocket expenses of acting as your attorney(s). You may provide for the attorney's remuneration as well at the place marked {6} in Part B of this document.
12. If your attorney(s) have reason in the future to believe that you have become or are becoming mentally incapable of managing your affairs, your attorney(s) must apply to have the enduring power registered in the High Court. Once registered an enduring power of attorney cannot be revoked effectively unless the Court confirms the revocation. You may revoke the power at any time before registration.
13. Before applying for registration of this power, your attorney(s) must give written notice of intention to do so to you and to the person s you notify of the execution of the enduring power. You and these persons (if they are not then available, certain of your relatives) will be able to object if you or they disagree with registration. The prescribed form of notice is contained in the Fourth Schedule to the Enduring Powers of Attorney Regulations, 1996.

Effect of accepting enduring power: information for attorney

14. If you have reason in the future to believe that the donor is, or is becoming, mentally incapable of managing his or her property and affairs, you must apply to have the enduring power registered in the High Court. Before doing so you must give written notice of your intention to the Registrar of Wards of Court and also to the donor and the persons whom the donor has notified of the execution of the enduring power. (If these persons are no longer available, notice must be given to certain relatives, as specified in the Powers of Attorney Act, 1996.) The prescribed form of the latter notice is contained in the Fourth Schedule to the Enduring Powers of Attorney

Regulations, 1996.

15. The enduring power will not come into force until it has been registered. However, once you have applied for registration you may take action under the power to maintain the donor and prevent loss to the donor's estate and maintain yourself and other persons in so far as that is permitted under Section 6(4) of the Act. You may also make any personal care decisions permitted under the power that cannot reasonably be deferred until the application for registration has been determined.

16. Unless there is a restriction in the enduring power preventing it, you may use the donor's money or other property for your benefit or that of other people to the following extent but no further, that is to say, by doing what the donor might be expected to do to provide for your or their needs. You may not use the donor's money to make gifts unless there is specific provision to that effect in the enduring power and then only to persons related to or connected with the donor on birth or marriage anniversaries or to charities to which the donor made or might be expected to make gifts. The amounts of any such gifts are subject to any restrictions in the enduring power and, in any event, may be only for reasonable amounts in relation to the extent of the donor's assets.

17. You are obliged to keep adequate accounts of the donor's property and affairs and to produce the accounting records to the Court if required.

18. In general, as an attorney you are in a fiduciary relationship with the donor. You must use proper care in exercising on behalf of the donor the authority given by the enduring power and you must act only within its scope. In particular, you must observe any conditions or restrictions imposed by the power and also the limits imposed by the Powers of Attorney Act, 1996.

19. You may recover the out-of-pocket expenses of acting as attorney. The enduring power may provide for remuneration for so acting.

20. You may disclaim at any time up to registration of the power. Thereafter you may do so only on notice to the donor and with the consent of the High Court.

21. After the enduring power has been registered you should notify the Registrar of Wards of Court if the donor dies or recovers.

PART B

Do not sign this form unless you understand what it means. If you are in any doubt you should ask your solicitor to explain the document to you.

ENDURING POWER OF ATTORNEY

I, [CNT:Name] of [CNT:LinearAddress] born on [CNT:DOB18] **APPOINT** [CAN:Name.Attorney#01] of [CAN:AddressSingle.Attorney#01] and [CAN:Name.Attorney#02] of [CAN:AddressSingle.Attorney#02], (jointly*/jointly and severally** ***delete which one does not apply***) to act as Attorney(s) for the purpose of Part II of the Powers of Attorney Act, 1996 with general authority in relation to all my property and affairs and also with authority to take on my behalf decisions on the following matters:

- Where I should live
- With whom I should live
- Who I should see and not see
- What training or rehabilitation I should get
- My diet and dress
- Inspection of my personal papers
- Housing, social services and other benefits for me

I APPOINT [CAN:Name.BkUpAtty#01] of [CAN:AddressSingle.BkUpAtty#01] (jointly*/jointly and severally** ***delete which one does not apply***) to act as Attorney(s) if an Attorney appointed by this instrument dies or is unable or declines to act or is disqualified from acting as Attorney.

I am required to give notice of the execution of this power to at least two persons. I shall notify the following two persons accordingly:

1. [CAN:Name.NoticePty#01] of [CAN:AddressSingle.NoticePty#01]
2. [CAN:Name.NoticePty#02] of [CAN:AddressSingle.NoticePty#02]

I intend this power to be effective during any subsequent mental incapacity of mine.

I have read or have had read to me the information in paragraphs 1–13 of Part A of the statutory instrument number 196 of 1996, **annexed hereto**.

SIGNED BY ME, [CNT:Name]
ON THE DAY OF
IN THE PRESENCE OF:

20

[CNT:Name]

FULL NAME OF WITNESS :
ADDRESS OF WITNESS

NOTICE OF EXECUTION BY DONOR
OF ENDURING POWER

TO: [CAN:Name.NoticePty#01]

OF: [CAN:AddressSingle.NoticePty#01]

TAKE NOTICE that I, [CNT:Name] of [CNT:LinearAddress] executed on the _____ an instrument creating an enduring Power of Attorney and appointing [CAN:Name.Attorney#01] of [CAN:AddressSingle.Attorney#01] and [CAN:Name.Attorney#02] of [CAN:AddressSingle.Attorney#02], to act as my Attorney/s, if I should become mentally incapacitated.

SIGNED: _____
[CNT:Name]

DATED:

NOTICE OF EXECUTION BY DONOR
OF ENDURING POWER

TO: [CAN:Name.NoticePty#02]

OF: [CAN:AddressSingle.NoticePty#02]

TAKE NOTICE that I, [CNT:Name] of [CNT:LinearAddress] executed on the _____ an instrument creating an enduring Power of Attorney and appointing [CAN:Name.Attorney#01] of [CAN:AddressSingle.Attorney#01] and [CAN:Name.Attorney#02] of [CAN:AddressSingle.Attorney#02], to act as my Attorney/s, if I should become mentally incapacitated.

SIGNED: _____
[CNT:Name]

DATED:

STATEMENT BY SOLICITOR

I, [MAT:FeName], Solicitor, of [DIA:SingleAddress] **HEREBY STATE** that after interviewing the donor (and making any necessary enquiries) I am satisfied that [CNT:Name] (the donor) understood the effect of creating the enduring power and I have no reason to believe that this document has been executed by the donor as a result of fraud or undue pressure.

SIGNED: _____
 [MAT:FeName] Solicitor .

DATED:

UNDERTAKING BY ATTORNEY

I, [CAN:Name.Attorney#01] of [CAN:AddressSingle.Attorney#01] understand my duties and obligations as Attorney, including my duty to apply to the High Court for the registration of this instrument under the Powers of Attorney Act, 1996, when the donor is or is becoming mentally incapable, my limited power to use the donor's property to benefit persons other than the donor, and my obligation to keep adequate accounts in relation to the management and disposal of the donor's property for production to the High Court, if required. I have read or have had read to me the information in paragraphs 1,2 and 14–21 of Part A of the statutory instrument number 196 of 1996.

I am not a minor or otherwise disqualified from acting as an Attorney.

SIGNATURE OF ATTORNEY:

ON THE DAY OF 2013

IN THE PRESENCE OF : _____
[CAN:Name.Attorney#01]

FULL NAME OF WITNESS

ADDRESS OF WITNES

OUR REF: [MAT:Code]/[MAT:FeCode]/[MAT:Secretary]

UNDERTAKING BY ATTORNEY

I, [CAN:Name.Attorney#02] of [CAN:AddressSingle.Attorney#02] understand my duties and obligations as Attorney, including my duty to apply to the High Court for the registration of this instrument under the Powers of Attorney Act, 1996, when the donor is or is becoming mentally incapable, my limited power to use the donor's property to benefit persons other than the donor, and my obligation to keep adequate accounts in relation to the management and disposal of the donor's property for production to the High Court, if required. I have read or have had read to me the information in paragraphs 1,2 and 14–21 of Part A of the statutory instrument number 196 of 1996.

I am not a minor or otherwise disqualified from acting as an Attorney.

SIGNATURE OF ATTORNEY:

ON THE DAY OF 2013

IN THE PRESENCE OF :

[CAN:Name.Attorney#02]

FULL NAME OF WITNESS

ADDRESS OF WITNESS

OUR REF: [MAT:Code]/[MAT:FeCode]/[MAT:Secretary]

**UNDERTAKING OF PERSON APPOINTED TO ACT AS ATTORNEY IF AN ORIGINAL
ATTORNEY IS UNABLE OR UNWILLING TO ACT**

I, [CAN:Name.BkUpAtty#01] of [CAN:AddressSingle.BkUpAtty#01] understand my duties and obligations if I have to act as Attorney, including my duty to apply to the High Court for the registration of this instrument under the Powers of Attorney Act, 1996, when the donor is or is becoming mentally incapable, my limited power to use the donor's property to benefit persons other than the donor, and my obligation to keep adequate accounts in relation to the management and disposal of the donor's property for production to the High Court, if required. I have read or have had read to me the information in paragraphs 1,2 and 14–21 of Part A of the statutory instrument number 196 of 1996.

SIGNATURE OF BACK UP ATTORNEY:

ON THE DAY OF 2013

IN THE PRESENCE OF :

[CAN:Name.BkUpAtty#01]

FULL NAME OF WITNESS

ADDRESS OF WITNESS

OUR REF: [MAT:Code]/[MAT:FeCode]/[MAT:Secretary]

STATEMENT BY REGISTERED
MEDICAL PRACTITIONER

I, [CAN:Name.Doctors#01], a registered Medical Practitioner, of [CAN:AddressSingle.Doctors#01], **HEREBY STATE** that in my opinion at the time this document was executed by the donor, [CNT:Name], [SYS:iif(UDF('ClientPronoun')='HIS', 'he', iif(UDF('ClientPronoun')='HER', 'she', 'he/she'))] had mental capacity with the assistance of such explanations as may have been given to the donor, to understand the effect of creating the power.

SIGNED: _____
[CAN:Name.Doctors#01]

DATED:

[MAT:Code]/[MAT:FeCode]/[MAT:Secretary]

[DATE:Today]

[CAN:Name.Doctors#01]
[CAN:Address.Doctors#01]

RE: [CNT:Name] of [CNT:LinearAddress]
Enduring Power of Attorney
DOB [CNT:DOB18]

Dear [CAN:Salutation.Doctors#01]

We refer to the above matter and to previous communications.

You might note that you furnished us with the relevant certificates to enable [CNT:Name] execute an Enduring Power of Attorney. The Certificate was dated the [UDF:DoctorCertDate]

It is a requirement of the Wards of Court Office that all Enduring Powers of Attorney be signed and dated within 21 days of the doctor's certificate. Unfortunately due to an ongoing court case and pressure of work an appointment has only now been made for [CNT:Name] to sign [SYS:iif(UDF('ClientPronoun')='HER', 'her', iif(UDF('ClientPronoun')='HIS', 'his', (UDF('ClientPronoun'))))] Enduring Power of Attorney.

Therefore the certificate previously supplied by you is now out of date and invalid.

In that respect we enclose herewith further certificate and we would be much obliged if you would sign and date the attached and return same to us in early course.

We await hearing and thank you in advance for your co-operation and assistance.

Yours faithfully,

[SYS:CON:NAME]

Email [MAT:FeEmail]

[MAT:Code]/[MAT:FeCode]/[MAT:Secretary]

[DATE:Today]

[CAN:Name.NoticePty#01]
[CAN:Address.NoticePty#01]
REGISTERED POST

RE: Our Client: [CNT:Name]
Enduring Power of Attorney

Dear [CAN:Salutation.NoticePty#01],

We act on behalf of your [UDF:NoticePty1Relation] [CNT:Name].

We write to formally advise you of the fact that [CNT:Name] has executed an Enduring Power of Attorney wherein [SYS:iif(UDF('ClientPronoun')='HER', 'she', iif(UDF('ClientPronoun')='HIS', 'he', 'he/she')))] appoints [CAN:Name.Attorney#01] and [CAN:Name.Attorney#02] as [SYS:iif(UDF('ClientPronoun')='HER', 'her', iif(UDF('ClientPronoun')='HIS', 'his', (UDF('ClientPronoun')))))] attorney(s). An Enduring Power of Attorney is an instrument which will enable both [CAN:Name.Attorney#01] and [CAN:Name.Attorney#02] to handle your [UDF:NoticePty1Relation]'s affairs in the event that [SYS:iif(UDF('ClientPronoun')='HER', 'she', iif(UDF('ClientPronoun')='HIS', 'he', 'he/she')))] is not mentally capable of handling [SYS:iif(UDF('ClientPronoun')='HER', 'her', iif(UDF('ClientPronoun')='HIS', 'his', (UDF('ClientPronoun')))))] own affairs.

This instrument was executed on the [UDF:SignDateEPA].

For your reference we enclose herewith copy of the Enduring Power of Attorney together with copy of Notice of Execution by Donor of Enduring Power. In the event that [CAN:Name.Attorney#01] and [CAN:Name.Attorney#02] is/are not able to act as Attorney(s), your [UDF:NoticePty1Relation] has appointed [CAN:Name.BkUpAtty#@&] to fill this role. An Enduring Power of Attorney basically enables an Attorney to handle the affairs of the donor, (i.e. your [UDF:NoticePty1Relation]) in the event that the donor is not mentally capable of handling [SYS:iif(UDF('ClientPronoun')='HER', 'her', iif(UDF('ClientPronoun')='HIS', 'his', (UDF('ClientPronoun')))))] own affairs.

The Enduring Power of Attorney is not operative at the moment, and only becomes operative if your [UDF:NoticePty1Relation] becomes unable to handle [SYS:iif(UDF('ClientPronoun')='HER', 'her', iif(UDF('ClientPronoun')='HIS', 'his', (UDF('ClientPronoun')))))] affairs. In this case, the Attorney/s, [CAN:Name.Attorney#01] and [CAN:Name.Attorney#02] will apply to the courts to

enforce the enduring power of Attorney. However, you will be notified if this situation arises, and you will have an opportunity to object if you believe that your [UDF:NoticePty1Relation] is capable of looking after [SYS:iif(UDF('ClientPronoun')='HER', 'her', iif(UDF('ClientPronoun')='HIS', 'his', (UDF('ClientPronoun'))))] affairs [SYS:iif(UDF('ClientPronoun')='HER', 'herself', iif(UDF('ClientPronoun')='HIS', 'himself', 'himself/herself'))].

At the moment the Enduring Power of Attorney is in place as a safeguard only, in order to help your [UDF:NoticePty1Relation] only if he/she becomes mentally incapable due to old age or illness, etc. It is a requirement of law that the donor's closest relatives are informed of the existence of an Enduring Power of Attorney, and that is the purpose of this letter.

However, if you have any queries in relation to this letter or the copy of the enduring power of attorney, do not hesitate to contact [MAT:FeName] of this office by telephone or email [MAT:FeEmail].

Yours faithfully,

[SYS:CON:NAME].

[MAT:Code]/[MAT:FeCode]/[MAT:Secretary]

[DATE:Today]

Private & Confidential

[CAN:Name.Attorney#01]

[CAN:Address.Attorney#01]

RE: Our Client: [CNT:Name]
Enduring Power of Attorney

Dear [CAN:Salutation.Attorney#01],

We act on behalf of your [UDF:Attorney1Relation], [CNT:Name].

We write to formally advise you of the fact that [CNT:Name] has executed an Enduring Power of Attorney wherein [SYS:iif(UDF('ClientPronoun')='HER', 'she', iif(UDF('ClientPronoun')='HIS', 'he', 'he/she'))) appoints you and [CAN:Name.Attorney#02] as [SYS:iif(UDF('ClientPronoun')='HER', 'her', iif(UDF('ClientPronoun')='HIS', 'his', (UDF('ClientPronoun'))))) attorney(s). An Enduring Power of Attorney is an instrument which will enable both you and [CAN:Name.Attorney#02] to handle your [UDF:Attorney1Relation]'s affairs in the event that [SYS:iif(UDF('ClientPronoun')='HER', 'she', iif(UDF('ClientPronoun')='HIS', 'he', 'he/she'))) is not mentally capable of handling [SYS:iif(UDF('ClientPronoun')='HER', 'her', iif(UDF('ClientPronoun')='HIS', 'his', (UDF('ClientPronoun'))))) own affairs. **We enclose herewith Undertaking to act as Attorney and would be obliged if you would sign same and return it in early course.**

This instrument was executed on the [UDF:SignDateEPA].

For your reference we enclose herewith copy of the Enduring Power of Attorney. In the event that you or [CAN:Name.Attorney#02] is not able to act as Attorney(s), your [UDF:Attorney1Relation] has appointed [CAN:Name.BkUpAtty#@&] to fill this role. An Enduring Power of Attorney basically enables an Attorney to handle the affairs of the donor, (i.e. your [UDF:Attorney1Relation]) in the event that the donor is not mentally capable of handling [SYS:iif(UDF('ClientPronoun')='HER', 'her', iif(UDF('ClientPronoun')='HIS', 'his', (UDF('ClientPronoun'))))) own affairs.

The Enduring Power of Attorney is not operative at the moment, and only becomes operative if your [UDF:Attorney1Relation] becomes unable to handle [SYS:iif(UDF('ClientPronoun')='HER', 'her', iif(UDF('ClientPronoun')='HIS', 'his', (UDF('ClientPronoun'))))) affairs. In this case, the Attorney/s, you and [CAN:Name.Attorney#02] will apply to the courts to enforce the enduring power of Attorney.

At the moment the Enduring Power of Attorney is in place as a safeguard only, in order to help your

[UDF:Attorney1Relation] only if [SYS:iif(UDF('ClientPronoun')='HER', 'she',
iif(UDF('ClientPronoun')='HIS', 'he', 'he/she'))] becomes mentally incapable due to old age or
illness, etc. It is a requirement of law that the donor's closest relatives are informed of the
existence of an Enduring Power of Attorney, and that is the purpose of this letter.

However, if you have any queries in relation to this letter or the copy of the enduring power of
attorney, do not hesitate to contact [MAT:FeName] of this office by telephone or email
[MAT:FeEmail].

Yours faithfully,

[MAT:FeName]
[SYS:CON:NAME]

Encl.

[MAT:Code]/[MAT:FeCode]/[MAT:Secretary]

[DATE:Today]

Private & Confidential

[CAN:Name.BkUpAtty#01]

[CAN:Address.BkUpAtty#01]

RE: Our Client: [CNT:Name]
Enduring Power of Attorney

Dear [CAN:Salutation.BkUpAtty#01],

We act on behalf of your [UDF:Attorney3Relation] [CNT:Name].

We write to formally advise you of the fact that [CNT:Name] has executed an Enduring Power of Attorney wherein [SYS:iif(UDF('ClientPronoun')='HER', 'she', iif(UDF('ClientPronoun')='HIS', 'he', 'he/she'))) appoints [CAN:Name.Attorney#01] and [CAN:Name.Attorney#02] as [SYS:iif(UDF('ClientPronoun')='HER', 'her', iif(UDF('ClientPronoun')='HIS', 'his', (UDF('ClientPronoun'))))) attorney(s). An Enduring Power of Attorney is an instrument which will enable both [CAN:Name.Attorney#01] and [CAN:Name.Attorney#02] to handle your [UDF:Attorney3Relation]'s affairs in the event that [SYS:iif(UDF('ClientPronoun')='HER', 'she', iif(UDF('ClientPronoun')='HIS', 'he', 'he/she'))) is not mentally capable of handling [SYS:iif(UDF('ClientPronoun')='HER', 'her', iif(UDF('ClientPronoun')='HIS', 'his', (UDF('ClientPronoun'))))) own affairs.

This instrument was executed on the [UDF:SignDateEPA].

For your reference we enclose herewith copy of the Enduring Power of Attorney. In the event that [CAN:Name.Attorney#01] or [CAN:Name.Attorney#02] is/are not able to act as Attorney(s), your [UDF:Attorney3Relation] has appointed you and [CAN:Name.BkUpAtty#02] to fill this role. An Enduring Power of Attorney basically enables an Attorney to handle the affairs of the donor, (i.e. your [UDF:Attorney3Relation]) in the event that the donor is not mentally capable of handling [SYS:iif(UDF('ClientPronoun')='HER', 'her', iif(UDF('ClientPronoun')='HIS', 'his', (UDF('ClientPronoun'))))) own affairs. We enclose herewith Undertaking to act as Back up Attorney and would be obliged if you would sign same and return it in early course.

The Enduring Power of Attorney is not operative at the moment, and only becomes operative if your [UDF:Attorney3Relation] becomes unable to handle [SYS:iif(UDF('ClientPronoun')='HER', 'her', iif(UDF('ClientPronoun')='HIS', 'his', (UDF('ClientPronoun'))))) affairs. In this case, the Attorney/s, [CAN:Name.Attorney#01] and [CAN:Name.Attorney#02] will apply to the courts to enforce the enduring power of Attorney.

At the moment the Enduring Power of Attorney is in place as a safeguard only, in order to help your

[UDF:Attorney3Relation] only if [SYS:iif(UDF('ClientPronoun')='HER', 'she',
iif(UDF('ClientPronoun')='HIS', 'he', 'he/she'))] becomes mentally incapable due to old age or
illness, etc. It is a requirement of law that the donor's closest relatives are informed of the
existence of an Enduring Power of Attorney, and that is the purpose of this letter.

However, if you have any queries in relation to this letter or the copy of the enduring power of
attorney, do not hesitate to contact [MAT:FeName] of this office by telephone or email
[MAT:FeEmail].

Yours faithfully,

[SYS:CON:NAME].

[MAT:Code]/[MAT:FeCode]/[MAT:Secretary]

[DATE:Today]

Private & Confidential

[CNT:Name]

[CNT:Address]

RE: Enduring Power of Attorney

Dear [CNT:Salut]

I refer to the above and to our recent meetings.

I enclose herewith copy Enduring Power of Attorney (including copy Explanatory Memorandum Part A Paragraphs 1–13 of Statutory Instrument 196 of 1996), as signed by you on the [UDF:SignDateEPA] for your attention, and I confirm that I have placed the original document in our safe for safekeeping.

In accordance with the Enduring Power of Attorney you have appointed [CAN:Name.Attorney#01] of [CAN:AddressSingle.Attorney#01] and [CAN:Name.Attorney#02] of [CAN:AddressSingle.Attorney#02] to look after your affairs if you are become incapable of doing so in the future. The Enduring Power of Attorney allows your Attorney/s to decide the following;-

- (a.) Where you should live.
- (b.) With whom you should live.
- (c.) Whom you should see or not see.
- (d.) What training or rehabilitation you should get.
- (e.) The diet and dress.
- (f.) Inspection of your personal papers.
- (g.) Housing, social and other benefits for you.

The Attorney/s will also be able to look after your finances and deal with your property, pay any bills on your behalf and sell your house in the event that the proceeds of sale of same are required to look after you.

The Enduring Power of Attorney only becomes operative in the event that you become mentally incapable of looking after your affairs. If this happens, an application will be made by your Attorney/s, [CAN:Name.Attorney#01] and [CAN:Name.Attorney#02] to the High Court to register the Enduring Power of Attorney, thereby the court will give the Attorney/s the power to look after

your affairs on your behalf. Before the Court will give your Attorney/s any such power it will require a certificate from your doctor confirming that you are no longer mentally capable of looking after your own affairs. The two people you have appointed as your Notice Parties, i.e.

[CAN:Name.NoticePty#01] of [CAN:AddressSingle.NoticePty#01] and

[CAN:Name.NoticePty#02] of [CAN:AddressSingle.NoticePty#02] will be notified by the solicitor involved in the application to the Court and they can object to the Court granting such power to the Attorney(s) if they think you are capable of managing your own affairs, and this will be taken into account by the Court. Thus, the role of [CAN:Name.NoticePty#01] and

[CAN:Name.NoticePty#02] is to protect your interests and in the event that same is necessary, to safeguard against the Attorney/s gaining control of your affairs if you are still in good health.

Finally, I enclose herewith our invoice in respect of the enduring power of attorney which I hope is to your satisfaction.

If you have any queries in respect of same do not hesitate to contact me.

Kind regards.

Yours sincerely,

[MAT:FeName]
[SYS:CON:NAME].

INVOICE

Invoice No: [UDF:InvoiceNoEPA]

[CNT:Name]
to
[SYS:CON:Name]

Re: Enduring Power of Attorney

PROFESSIONAL FEES for all work done in relation to the Enduring Power of Attorney, to include taking initial instructions, drafting Enduring Power of Attorney, attending with clients at execution of same, notifying nominees that Donor has made Enduring Power of Attorney, and preparing and completing Affidavits of Service in this regard;

For all the foregoing and for all advice's, consultations and attendance's an inclusive fee of

€350.00

V.A.T. @ 23%

€80.50

OUTLAY NOT SUBJECT TO VAT

Commissioners fees of Affidavits of Service €20.00

€40.00

Doctors fee for certificate €[UDF:DocCertFeeEPA]

Total

€

Dated this day of 20

Signed_____

[SYS:CON:NAME]

Solicitors

[DIA:Address]

VAT No:

REF: [MAT:Code]/[MAT:FeCode]/[MAT:Secretary]

TO:

[CNT:Name]

[CNT:Address]

[MAT:Code]/[MAT:FeCode]/[MAT:Secretary]

[DATE:Today]

[CAN:Name.NoticePty#02]
[CAN:Address.NoticePty#02]
REGISTERED POST

RE: Our Client: [CNT:Name]
Enduring Power of Attorney

Dear [CAN:Salutation.NoticePty#02],

We act on behalf of your [UDF:NoticePty2Relation] [CNT:Name].

We write to formally advise you of the fact that [CNT:Name] has executed an Enduring Power of Attorney wherein [SYS:iif(UDF('ClientPronoun')='HER', 'she', iif(UDF('ClientPronoun')='HIS', 'he', 'he/she'))) appoints [CAN:Name.Attorney#01] and [CAN:Name.Attorney#02] as [SYS:iif(UDF('ClientPronoun')='HER', 'her', iif(UDF('ClientPronoun')='HIS', 'his', (UDF('ClientPronoun'))))) attorney(s). An Enduring Power of Attorney is an instrument which will enable both [CAN:Name.Attorney#01] and [CAN:Name.Attorney#02] to handle your [UDF:NoticePty2Relation]'s affairs in the event that [SYS:iif(UDF('ClientPronoun')='HER', 'she', iif(UDF('ClientPronoun')='HIS', 'he', 'he/she'))) is not mentally capable of handling [SYS:iif(UDF('ClientPronoun')='HER', 'her', iif(UDF('ClientPronoun')='HIS', 'his', (UDF('ClientPronoun'))))) own affairs.

This instrument was executed on the [UDF:SignDateEPA].

For your reference we enclose herewith copy of the Enduring Power of Attorney together with copy of Notice of Execution by Donor of Enduring Power. In the event that [CAN:Name.Attorney#01] and [CAN:Name.Attorney#02] is/are not able to act as Attorney(s), your [UDF:NoticePty2Relation] has appointed [CAN:Name.BkUpAtty#@&] to fill this role. An Enduring Power of Attorney basically enables an Attorney to handle the affairs of the donor, (i.e. your [UDF:NoticePty2Relation]) in the event that the donor is not mentally capable of handling [SYS:iif(UDF('ClientPronoun')='HER', 'her', iif(UDF('ClientPronoun')='HIS', 'his', (UDF('ClientPronoun'))))) own affairs.

The Enduring Power of Attorney is not operative at the moment, and only becomes operative if your [UDF:NoticePty2Relation] becomes unable to handle [SYS:iif(UDF('ClientPronoun')='HER', 'her', iif(UDF('ClientPronoun')='HIS', 'his', (UDF('ClientPronoun'))))) affairs. In this case, the Attorney/s, [CAN:Name.Attorney#01] and [CAN:Name.Attorney#02] will apply to the courts to enforce the enduring power of Attorney. However, you will be notified if this situation arises, and

you will have an opportunity to object if you believe that your [UDF:NoticePty2Relation] is capable of looking after [SYS:iif(UDF('ClientPronoun')='HER', 'her', iif(UDF('ClientPronoun')='HIS', 'his', (UDF('ClientPronoun')))))] affairs [SYS:iif(UDF('ClientPronoun')='HER', 'herself', iif(UDF('ClientPronoun')='HIS', 'himself', 'himself/herself'))].

At the moment the Enduring Power of Attorney is in place as a safeguard only, in order to help your [UDF:NoticePty2Relation] only if [SYS:iif(UDF('ClientPronoun')='HER', 'she', iif(UDF('ClientPronoun')='HIS', 'he', 'he/she')))] becomes mentally incapable due to old age or illness, etc. It is a requirement of law that the donor's closest relatives are informed of the existence of an Enduring Power of Attorney, and that is the purpose of this letter.

However, if you have any queries in relation to this letter or the copy of the enduring power of attorney, do not hesitate to contact [MAT:FeName] of this office by telephone or email [MAT:FeEmail].

Yours faithfully,

[SYS:CON:NAME].

[MAT:Code]/[MAT:FeCode]/[MAT:Secretary]

[DATE:Today]

Private & Confidential

[CAN:Name.Attorney#02]

[CAN:Address.Attorney#02]

RE: Our Client: [CNT:Name]
Enduring Power of Attorney

Dear [CAN:Salutation.Attorney#02],

We act on behalf of your [UDF:Attorney2Relation], [CNT:Name].

We write to formally advise you of the fact that [CNT:Name] has executed an Enduring Power of Attorney wherein [SYS:iif(UDF('ClientPronoun')='HER', 'she', iif(UDF('ClientPronoun')='HIS', 'he', 'he/she'))) appoints you and [CAN:Name.Attorney#01] as [SYS:iif(UDF('ClientPronoun')='HER', 'her', iif(UDF('ClientPronoun')='HIS', 'his', (UDF('ClientPronoun'))))) attorney(s). An Enduring Power of Attorney is an instrument which will enable both you and [CAN:Name.Attorney#01] to handle your [UDF:Attorney2Relation]'s affairs in the event that [SYS:iif(UDF('ClientPronoun')='HER', 'she', iif(UDF('ClientPronoun')='HIS', 'he', 'he/she'))) is not mentally capable of handling [SYS:iif(UDF('ClientPronoun')='HER', 'her', iif(UDF('ClientPronoun')='HIS', 'his', (UDF('ClientPronoun'))))) own affairs. **We enclose herewith Undertaking to act as Attorney and would be obliged if you would sign same and return it in early course.**

This instrument was executed on the [UDF:SignDateEPA].

For your reference we enclose herewith copy of the Enduring Power of Attorney. In the event that you or [CAN:Name.Attorney#01] is not able to act as Attorney(s), your [UDF:Attorney2Relation] has appointed [CAN:Name.BkUpAtty#@&] to fill this role. An Enduring Power of Attorney basically enables an Attorney to handle the affairs of the donor, (i.e. your [UDF:Attorney2Relation]) in the event that the donor is not mentally capable of handling [SYS:iif(UDF('ClientPronoun')='HER', 'her', iif(UDF('ClientPronoun')='HIS', 'his', (UDF('ClientPronoun'))))) own affairs.

The Enduring Power of Attorney is not operative at the moment, and only becomes operative if your [UDF:Attorney2Relation] becomes unable to handle [SYS:iif(UDF('ClientPronoun')='HER', 'her', iif(UDF('ClientPronoun')='HIS', 'his', (UDF('ClientPronoun'))))) affairs. In this case, the Attorney/s, you and [CAN:Name.Attorney#01] will apply to the courts to enforce the enduring power of Attorney.

At the moment the Enduring Power of Attorney is in place as a safeguard only, in order to help your

[UDF:Attorney2Relation] only if [SYS:iif(UDF('ClientPronoun')='HER', 'she',
iif(UDF('ClientPronoun')='HIS', 'he', 'he/she'))] becomes mentally incapable due to old age or
illness, etc. It is a requirement of law that the donor's closest relatives are informed of the
existence of an Enduring Power of Attorney, and that is the purpose of this letter.

However, if you have any queries in relation to this letter or the copy of the enduring power of
attorney, do not hesitate to contact [MAT:FeName] of this office by telephone or email
[MAT:FeEmail].

Yours faithfully,

[MAT:FeName]
[SYS:CON:NAME]

Encl.

UNDERTAKING BY ATTORNEY

I, [CAN:Name.Attorney#01] of [CAN:AddressSingle.Attorney#01] understand my duties and obligations as Attorney, including my duty to apply to the High Court for the registration of this instrument under the Powers of Attorney Act, 1996, when the donor is or is becoming mentally incapable, my limited power to use the donor's property to benefit persons other than the donor, and my obligation to keep adequate accounts in relation to the management and disposal of the donor's property for production to the High Court, if required. I have read or have had read to me the information in paragraphs 1,2 and 14–21 of Part A of the statutory instrument number 196 of 1996.

I am not a minor or otherwise disqualified from acting as an Attorney.

SIGNATURE OF ATTORNEY:

ON THE DAY OF 2013

IN THE PRESENCE OF : _____
[CAN:Name.Attorney#01]

FULL NAME OF WITNESS

ADDRESS OF WITNES

OUR REF: [MAT:Code]/[MAT:FeCode]/[MAT:Secretary]

UNDERTAKING BY ATTORNEY

I, [CAN:Name.Attorney#02] of [CAN:AddressSingle.Attorney#02] understand my duties and obligations as Attorney, including my duty to apply to the High Court for the registration of this instrument under the Powers of Attorney Act, 1996, when the donor is or is becoming mentally incapable, my limited power to use the donor's property to benefit persons other than the donor, and my obligation to keep adequate accounts in relation to the management and disposal of the donor's property for production to the High Court, if required. I have read or have had read to me the information in paragraphs 1,2 and 14–21 of Part A of the statutory instrument number 196 of 1996.

I am not a minor or otherwise disqualified from acting as an Attorney.

SIGNATURE OF ATTORNEY:

ON THE DAY OF 2013

IN THE PRESENCE OF :

[CAN:Name.Attorney#02]

FULL NAME OF WITNESS

ADDRESS OF WITNESS

OUR REF: [MAT:Code]/[MAT:FeCode]/[MAT:Secretary]

[MAT:Code]/[MAT:FeCode]/[MAT:Secretary]

[DATE:Today]

Private & Confidential

[CAN:Name.Attorney#01]

[CAN:Address.Attorney#01]

RE: Enduring Power of Attorney of [CNT:Name]

Dear [CAN:Salutation.Attorney#01]

We refer to the above matter and to previous communications ending with our correspondence to you dated the [UDF:CorrespondenceDate] enclosing an Undertaking for signing and return by you.

We note that we have not received a response from you.

We would advise that your [UDF:Attorney1Relation] [CNT:Name] executed the Enduring Power of Attorney on the [UDF:SignDateEPA] and all undertakings must be signed by Attorneys within 21 days of that date.

In the respect, we enclose herewith further Undertaking duly backdated and we would be obliged if you would return same at your earliest convenience so that we may complete the Enduring Power of Attorney.

We await hearing.

Yours faithfully,

[SYS:CON:NAME]

Email [MAT:FeEmail]

[MAT:Code]/[MAT:FeCode]/[MAT:Secretary]

[DATE:Today]

Private & Confidential

[CAN:Name.Attorney#02]

[CAN:Address.Attorney#02]

RE: Enduring Power of Attorney of [CNT:Name]

Dear [CAN:Salutation.Attorney#02]

We refer to the above matter and to previous communications ending with our correspondence to you dated the [UDF:CorrespondenceDate] enclosing an Undertaking for signing and return by you.

We note that we have not received a response from you.

We would advise that your [UDF:Attorney2Relation] [CNT:Name] executed the Enduring Power of Attorney on the [UDF:SignDateEPA] and all undertakings must be signed by Attorneys within 21 days of that date.

In the respect, we enclose herewith further Undertaking duly backdated and we would be obliged if you would return same at your earliest convenience so that we may complete the Enduring Power of Attorney.

We await hearing.

Yours faithfully,

[SYS:CON:NAME]

Email [MAT:FeEmail]

[MAT:Code]/[MAT:FeCode]/[MAT:Secretary]

[DATE:Today]

Private & Confidential

[CNT:Name]

[CNT:Address]

RE: Enduring Power of Attorney

Dear [CNT:Salut]

I refer to the above matter and to my correspondence dated the [UDF:CorrespondenceDate] wherein you gave instructions to prepare an Enduring Power of Attorney.

I note that my Invoice remains outstanding and I would be much obliged if you would contact me with a view to discharging by way of interim payments to this office or in full.

I await hearing.

Kindest regards

Yours sincerely,

[MAT:FeName]

[SYS:CON:NAME]

[MAT:Code]/[MAT:FeCode]/[MAT:Secretary]

[DATE:Today]

[CAN:Name.Doctors#01]
[CAN:Address.Doctors#01]

RE: [CNT:Name] of [CNT:LinearAddress]
Enduring Power of Attorney
DOB [CNT:DOB]

Dear [CAN:Salutation.Doctors#01]

We refer to the above matter and to previous communications.

We enclose herewith cheque in the sum of €[UDF:DocCertFeeEPA] in full and final discharge of the Invoice furnished by you in respect of the above.

Please acknowledge safe receipt.

Yours faithfully,

[SYS:CON:NAME]

Email [MAT:FeEmail]

**IN THE MATTER OF THE POWERS OF ATTORNEY ACT 1996 AND IN THE MATTER
OF AN INSTRUMENT CREATING AN ENDURING POWER OF ATTORNEY
EXECUTED BY [CNT:NAME] OF [CNT:LINEARADDRESS] ON THE
[UDF:SIGNDATEEPA]**

AFFIDAVIT OF SERVICE

I, [MAT:FENAME], [UDF:FeeEarnDesc] of [SYS:CON:Name], [DIA:SingleAddress] aged 18 years and upwards **MAKE OATH AND SAY AS FOLLOWS:**

1. **I MAKE** this Affidavit from facts within my own knowledge save for otherwise appearing and whereso appearing I depose the same to be true and accurate to best of my information, knowledge and belief and I am duly authorised to make this Affidavit.
2. I SAY that I did on the [UDF:ServeNoticeDate] at 4.00 p.m. at Post Office served the Notice of Execution by Donor dated the [UDF:SignDateEPA] by posting a true copy thereof in a pre-paid registered envelope addressed to [CAN:Name.NoticePty#01] of [CAN:AddressSingle.NoticePty#01]. I beg to refer to the official Post Office Certificate of Posting of said registered envelope attached hereto and a form which marked with the letter "A" I have signed my name prior to the swearing hereof.
3. **THE SAID** envelope has not been returned marked undelivered to the sender.

SWORN this day of November 2013 by the
said [MAT:FeName] at [DIA:SingleAddress] before
me a Commissioner for Oaths/Practising and I know
the DEPONENT.

**COMMISSIONER FOR OATHS /
PRACTISING SOLICITOR**

EXHIBIT “A”

**IN THE MATTER OF THE POWERS OF ATTORNEY ACT 1996 AND IN THE MATTER
OF AN INSTRUMENT CREATING AN ENDURING POWER OF ATTORNEY
EXECUTED BY [CNT:NAME] OF [CNT:LINEARADDRESS] ON THE
[UDF:SIGNDATEEPA]**

AFFIDAVIT OF SERVICE

I, [MAT:FENAME], [UDF:FeeEarnDesc] of [SYS:CON:Name], [DIA:SingleAddress] aged 18 years and upwards **MAKE OATH AND SAY AS FOLLOWS:**

1. **I MAKE** this Affidavit from facts within my own knowledge save for otherwise appearing and whereso appearing I depose the same to be true and accurate to best of my information, knowledge and belief and I am duly authorised to make this Affidavit.
2. I SAY that I did on the [UDF:ServeNoticeDate] at 4.00 p.m. at Post Office served the Notice of Execution by Donor dated the [UDF:SignDateEPA] by posting a true copy thereof in a pre-paid registered envelope addressed to [CAN:Name.NoticePty#02] of [CAN:AddressSingle.NoticePty#02]. I beg to refer to the official Post Office Certificate of Posting of said registered envelope attached hereto and a form which marked with the letter "A" I have signed my name prior to the swearing hereof.
3. **THE SAID** envelope has not been returned marked undelivered to the sender.

SWORN this day of November 2013 by the
said [MAT:FeName] at [DIA:SingleAddress] before
me a Commissioner
for Oaths/Practising and I know the DEPONENT.

**COMMISSIONER FOR OATHS /
PRACTISING SOLICITOR**

EXHIBIT “A”