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STATUTORY POWER OF ATTORNEY- SHORT FORM

NOTICE: THE POWERS GRANTED BY THIS DOCUMENT ARE BROAD AND SWEEPING. THEY ARE DEFINED IN THE CONNECTICUT UNIFORM POWER OF ATTORNEY ACT, WHICH EXPRESSLY PERMITS THE USE OF ANY OTHER OR DIFFERENT FORM OF POWER OF ATTORNEY DESIRED BY THE PARTIES CONCERNED. THE GRANTOR OF ANY POWER OF ATTORNEY OR THE AGENT MAY MAKE APPLICATION TO A COURT OF PROBATE FOR AN ACCOUNTING AS PROVIDED IN SUBSECTION (b) OF SECTION 45a-175 OF THE CONNECTICUT GENERAL STATUTES. THIS POWER OF ATTORNEY DOES NOT AUTHORIZE THE AGENT TO MAKE HEALTH CARE DECISIONS FOR YOU.

KNOW ALL PEOPLE BY THESE PRESENTS, which are intended to constitute a GENERAL POWER OF ATTORNEY pursuant to the Connecticut Uniform Power of Attorney Act:

That I,	T (N 1A11 CD' '1	
	Insert Name and Address of Principal	
Do hereby app	Insert Name and Address(es) of Agent(s)	
	"O ACTagent is designated and the principal wishes each agent alone to be able to exercise the power of a second power of the word "severally" shall require the agents of the word "severally" shall require the word "severally" shall r	
respect to the	: In my name, place and stead in any way which I myself could do, if I we following matters as each of them is defined in the Connecticut Uniform Pom permitted by law to act through an agent:	
NOT desire to	the out and initial in the opposite box any one or more of the subdivisions as o give the agent authority. Such elimination of any one or more of subdivisionally constitute an elimination of subdivision (N).]	
	To strike out any subdivision the principal must draw a line throthe text of that subdivision AND write «his/her» initials in the box of	
(A)	Real property;	
(B)	Tangible personal property;	
(C)	Stocks and bonds;	
(D)	Commodities and options;	
(E)	Banks and other financial institutions;	
(F)	Operation of entity of business;	
(G)	Insurance and annuities;	
(H)	Estates, trusts and other beneficial interests	
(I)	Claims and litigation;	
(J)	Personal and family maintenance;	
(K)	Benefits from governmental programs or civil or military service;	
(L)	Retirement plans;	
(M)	Taxes;	
(N)	All other matters;	

Second: With full and unqualified authority to delegate any and all of the foregoing powers to any person or persons whom my agent(s) shall select;

Third: Hereby ratifying and confirming all that said agent(s) or substitute(s) do or cause to be done.

Fourth: LIMITATION ON AGENT'S AUTHORITY. An agent that is not my ancestor, spouse, or descendant MAY NOT use my property to benefit the agent or a person to whom the agent owes an obligation of support unless I have included that authority in the special instructions.

Fifth: DESIGNATION OF SUCCESSOR AGENT(S) (OPTIONAL)

If my agent is unable or unwilling to act for r	ne, I name as my succ	cessor agent:
Name of Successor Agent:		
Successor Agent's Address:		
If my successor agent is unable or unwilling	to act for me, I name	as my second successor agent:
Name of Second Successor Agent	t:	
Second Successor Agent's Address	ss:	
Sixth : EFFECTIVE DATE This potherwise in the special instructions.	power of attorney is e	effective immediately unless I have stated
The execution of this statutory form power of prescribed for the acknowledgement of a con-		luly acknowledged by the principal in the manner erty.
In WITNESS WHEREOF, I have 1, 20	hereunto signed my	name and affixed my seal this day of
Witness	Signatu	re of Principal
Witness		
STATE OF CONNECTICUT		
STATE OF CONNECTICUT ss:		
On this day of, 20	, before me	, signer of the foregoing
instrument, personally appeared and acknow deed, before me, on this day of		of such instrument to be «his/her» free act and, 20
	Notary Publ	ic / Commissioner of the Superior Court