

POWER OF ATTORNEY APPLICATION
LSSS-NCR Quantico Legal Assistance Office

PRIVACY ACT STATEMENT: Information is solicited in accordance with Title 10, US Code Section 3013, and is used to provide information necessary in preparation of a Power of Attorney. Solicited information is voluntary; however, failure to provide information precludes the preparation of a power of attorney.

YOUR NAME (First, MI, Last)

RANK / Branch of Service:

**LAST 4 OF
SSN:**

**POA EXPIRATION
DATE: (MAX – 1 year)**

Active Duty _____
Family Member _____
Retired _____

Have you previously visited our office and received any type of service: Yes No

If you are a service member, do you want this POA to remain in effect if you become a prisoner of war or are declared missing? Yes No

State of Legal Residence:

Duty Station:

**NAME & RELATIONSHIP OF PERSON RECEIVING
POA** (your agent):

Complete Mailing Address:

**TYPE OF
POWER OF
ATTORNEY:**
(check one)

1. **GENERAL Power of Attorney**

If you are requesting a General POA, do not complete the remainder of this form.

2. **SPECIAL Power of Attorney**

Please check the categories that apply and provide all requested information. Failure to provide the requested information may result in the Special POA not being drafted.

a. **Claims/Financial
Transactions:**

Cash checks, etc.

File claims/receive payments

Obtain Service Relief Loan

(Check w/your bank)

b. **Government Quarters:**

Sign for
Quarters

Clear
Quarters

Address of Quarters:

c. **Household goods/personal property:**

Receive

Ship

d. **Vehicles:**

1. **Year/Make/Model of Vehicle:** _____

Possess, use, register, insure, etc. Sell Ship to: _____ Receive from: _____

2. **Year/Make/Model of Vehicle:** _____

Possess, use, register, insure, etc. Sell Ship to: _____ Receive from: _____

3. **Purchase a vehicle in my name:** Year / Make / Model: _____

Interest Rate: _____% **Purchase price** (not to exceed): \$ _____ **Length of Loan** (not to exceed): _____ Months

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e. **Child Care:**

- Authorize medical treatment ONLY *In loco parentis* ("in the place of a parent" -- assumes parental duties, including authorizing medical treatment for a child)

Child's Full Name and Date of Birth: _____

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f. **Real Property:** We will only draft Special POA's for the following categories if the party has initiated the process, provides the following information and has a projected completion date.

Purchase property located at: _____

Interest Rate: _____% **Purchase price** (not to exceed): \$_____ **Length of Mortgage** (not to exceed): _____ Years

Refinance my property located at: _____

Interest Rate: _____% **Purchase price** (not to exceed): \$_____ **Length of Mortgage** (not to exceed): _____ Years

Sell my property located at: _____

Sales Price (at or above): \$_____

Manage my property located at: _____

Lease my current residence located at: _____

Term of Lease: _____ Months **Monthly Rent Payment** (not to exceed): \$_____ **Amount of Security Deposit:** \$_____ (not lower than)

Rent/Lease a suitable residence located at: _____

Term of Lease: _____ Months **Monthly Rent Payment** (not to exceed): _____ **Amount of Security Deposit:** \$_____ (not to exceed)

g. **Other:** (Insert Description)

POWER OF ATTORNEY ADVISORY

1. It is important to understand the meaning and effect of your power of attorney. The power of attorney is one of the strongest legal documents that an individual can give to another person. Accordingly, you must be making it of your own free will. It authorizes your agent (“grantee” or “attorney-in-fact”) to act on your behalf and carry on your business in your absence. Please note that a person or business does not have to accept or acknowledge your power of attorney; there is no legal requirement that another person accept the document.
2. Making a **general** power of attorney is an important action with serious consequences. A general power of attorney gives someone else the legal authority to act on your behalf—to do **anything** that you could do relating to your property and personal affairs. With a general power of attorney, your agent can (for example) rent or buy a house with your money, borrow money that you must repay, sell your car, sue someone for you, or remove all funds from your bank account. Your agent can legally bind you. Because this document grants virtually unlimited authority to your agent, it must only be given to a person you trust completely. If you think you need a general power of attorney, you should consult a legal assistance attorney.
3. A **special** power of attorney authorizes your agent to do one or more certain specified acts, such as selling your car, shipping household goods, cashing a paycheck, selling real property, or authorizing emergency medical care for your minor child. Your agent will only be able to carry out the actions specified in the special power of attorney.
4. You should grant no greater power than is necessary. In addition, your agent should be someone in whom you have absolute trust and confidence.
5. The policy of this office is that no power of attorney will exceed one year in duration. If you think you need a power of attorney in excess of one year, you should consult a legal assistance attorney.
6. You should give the original to your agent and keep a second copy for yourself.
7. Your power of attorney will **terminate** upon: (a) a date specified in the document; (b) the death of either you or your agent; or (c) your mental incapacitation.
8. Should you desire to **revoke** a power of attorney prior to its stated termination date, you should be aware that, once executed, it is difficult to prevent a power of attorney from being used. There are some steps that may give the grantor some limited protection. These steps include, but are not limited to (a) recording a revocation in the counties in which the power was executed, in which the grantee resides, and in which the power may be used; (b) publishing notice in the newspapers in the same counties as above that the grantor has revoked the power; and (c) sending a copy of the revocation to the grantee via registered or certified mail, return receipt requested. Contact your legal assistance office for additional information.