

Application to Register a Lasting Power of Attorney Mortgage Account

This form must be completed to enable the Attorney(s) to administer and carry out transactions on the mortgage account. This form can be completed electronically then saved and printed. If completing manually, please complete in black ink and BLOCK CAPITALS. If you need any help completing this form, please call us on 01257 235001 or visit your local branch.

1.Type of registration				
Power of Attorney (Must be Property & Financial Affairs)	Deputy Court of Protection			
2. Borrower Details (Donor)				
Surname	Title Mr Mrs Miss Ms Other			
Forename(s) in full	Date of Birth D D M M Y Y Y Y			
Address				
	Postcode			
3. Account Details				
Mortgage Account Number				
4. Details of Attorney(s) or Deputy(s) to be added				
The original or certified copy of the Registered Power of Attorney must accompany this application.				
Date Power of Attorney issued How many Attorneys are to be added?				
Where more than one attorney, how must decisions be made?				
Are there any restrictions or conditions in respect of specific transactions?				
If Yes, please specify below:				
Title Mr Mrs Miss Other	Title Mr Mrs Miss Ms Other			
Surname	Surname			
Forename (s)	Forename (s)			
Address	Address			
Postcode	Postcode			
Date of Birth D D M M Y Y Y Y	Date of Birth D D M M Y Y Y Y			
Telephone Number	Telephone Number			
Email	Email			



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5. Correspondence				
Original correspondence will be sent to the Donor at the property address. If copy correspondence is required to be sent to an Attorney(s) please provide details in the box below:				
6.Identification for Attorne	y(s)			
To meet the requirements of the Society's Identification criteria, the Society will undertake an electronic check through its chosen credit agency in order to fulfil this. If the electronic check is unsuccessful, we would then require one form of identification from List A and List B as stated in our Power of Attorney Help Sheet.				
7. Online PA Viewing code				
If you have been provided with	an Online Viewing Code from the Office of Public Gu	uardian, please enter below.		
V				
Please note these codes last for 30 days after being issued, if you have any issues with the code please contact the Office of the Public Guardian.				
8. Declaration of Capacity Status				
In your view as Attorney(s) is the Member mentally capable of managing their own financial affairs so that we may allow them to transact accordingly. Please note where queries and restrictions may apply we may request medical evidence or written communication from an Attorney(s) in order to validate and register a document with the Chorley Building Society.				
The Member (Donor) is mentally capable of managing their own financial affairs.				
The Member (Donor) is not mentally capable of managing their own financial affairs.				
The managed (2010), 10 10 10 10 10 10 10 10 10 10 10 10 10				
9. Signatures of Attorney(s) or Deputy(s) to be registered onto the account(s)				
Attorney / Deputy name		Attorney / Deputy name		
Signed		Signed		
Date		Date		

Your Personal Information and what we do with it

We are a data controller of your personal information. The way that we process your personal information is described in our Privacy Notice. This information is available on our website www.chorleybs.co.uk/privacy