

# ARIZONA POWER OF ATTORNEY FORM

## I. APPOINTMENT OF AGENT

I, \_\_\_\_\_, residing at  
\_\_\_\_\_, Arizona (hereinafter referred to as the "Principal"),  
being of sound mind, hereby appoint \_\_\_\_\_, residing at  
\_\_\_\_\_ (hereinafter referred to as the "Agent"), as my true  
and lawful attorney-in-fact.

## II. APPOINTMENT OF ALTERNATE AGENT

If my Agent is unable or unwilling to serve for any reason, I hereby appoint  
\_\_\_\_\_, residing at  
\_\_\_\_\_, as my Successor Agent to serve with the same  
powers and authorities granted to the original Agent.

## III. DURABILITY AND EFFECTIVE DATE

### A. Durability

Pursuant to Arizona Revised Statutes (A.R.S.) § 14-5501, this Power of Attorney is durable and shall not be affected by my subsequent disability, incapacity, or lapse of time.

### B. Effective Date (Check one)

☐ **Effective Immediately:** This Power of Attorney shall become effective immediately upon the date of my signature below and shall continue until revoked by me or terminated by my death.

☐ **Springing (Effective upon Incapacity):** This Power of Attorney shall become effective only upon my disability or incapacity. For the purposes of this provision, I shall be considered disabled or incapacitated if a licensed physician certifies in writing that I am unable to manage my property or financial affairs effectively.

#### **IV. GRANT OF GENERAL AUTHORITY**

I grant my Agent and any Successor Agent general authority to act for me with respect to the following subjects as defined in the Arizona Uniform Power of Attorney Act (A.R.S. Title 14, Chapter 5, Article 5):

1. **Real Property:** Authority to buy, sell, lease, mortgage, and manage real estate.
2. **Tangible Personal Property:** Authority to buy, sell, and manage personal property.
3. **Stocks and Bonds:** Authority to buy, sell, and exchange stocks and bonds.
4. **Commodities and Options:** Authority to buy, sell, exchange, and manage commodities and options.
5. **Banks and Other Financial Institutions:** Authority to open, close, and manage bank accounts, safe deposit boxes, and other financial accounts.
6. **Operation of Entity or Business:** Authority to manage, operate, and take action regarding any business in which I have an interest.
7. **Insurance and Annuities:** Authority to procure, maintain, and manage insurance and annuity contracts.
8. **Estates, Trusts, and Other Beneficial Interests:** Authority to act for me in all matters that affect a trust, probate estate, guardianship, conservatorship, escrow, or custodianship.
9. **Claims and Litigation:** Authority to assert and defend claims and litigate on my behalf.
10. **Personal and Family Maintenance:** Authority to provide for the support and standard of

living of myself and my family.

**11. Benefits from Governmental Programs:** Authority to apply for and receive benefits from Social Security, Medicare, Medicaid, or other government programs.

**12. Retirement Plans:** Authority to manage retirement plans and select payment options.

**13. Taxes:** Authority to prepare, sign, and file tax returns and represent me before tax authorities.

## **V. GRANT OF SPECIFIC AUTHORITY (OPTIONAL)**

My Agent MAY NOT do any of the following specific acts for me UNLESS I have INITIALED the specific authority listed below:

(CAUTION: Granting any of the following will give your Agent the authority to take actions that could significantly reduce your property or change how your property is distributed at your death.)

- ☐ Create, amend, revoke, or terminate an inter vivos trust
- ☐ Make a gift, subject to the limitations of the Arizona Uniform Power of Attorney Act
- ☐ Create or change rights of survivorship
- ☐ Create or change a beneficiary designation
- ☐ Authorize another person to exercise the authority granted under this Power of Attorney
- ☐ Waive the Principal's right to be a beneficiary of a joint and survivor annuity, including a survivor benefit under a retirement plan
- ☐ Exercise fiduciary powers that the Principal has authority to delegate

## **VI. 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 below.

## **VII. SPECIAL INSTRUCTIONS**

I give the following special instructions or limitations on the powers granted to my Agent:

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## **VIII. NOMINATION OF CONSERVATOR OR GUARDIAN**

If it becomes necessary for a court to appoint a conservator of my estate or guardian of my person, I nominate the following person(s) for appointment:

Nominee for Conservator of my Estate: \_\_\_\_\_

Nominee for Guardian of my Person: \_\_\_\_\_

## **IX. RELIANCE ON THIS POWER OF ATTORNEY**

Any person, including my Agent, may rely upon the validity of this Power of Attorney or a copy of it unless that person knows it has terminated or is invalid. Pursuant to A.R.S. § 14-5506, any third party who relies in good faith on the authority of the Agent within the scope of this Power of Attorney is protected as if the Agent had been properly authorized.

## **X. AGENT COMPENSATION AND REIMBURSEMENT**

(Check one)

☐ My Agent is entitled to reimbursement for reasonable expenses incurred on my behalf but shall receive no compensation for their time and services.

☐ My Agent is entitled to reimbursement for reasonable expenses AND reasonable compensation for their time and services.

## **XI. GOVERNING LAW**

This Power of Attorney shall be governed by the laws of the State of Arizona.

## **XII. SIGNATURE AND ACKNOWLEDGMENT**

I am fully informed as to all the contents of this form and understand the full import of this grant of powers to my Agent.

**Principal's Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_

**Print Name:** \_\_\_\_\_

## **XIII. WITNESS STATEMENT**

(Pursuant to A.R.S. § 14-5501(D)(3), the witness cannot be the Agent, the Agent's spouse, or the Agent's children.)

I, the undersigned witness, certify that the Principal signed this Power of Attorney in my presence and that the Principal appears to be of sound mind and under no duress, fraud, or undue

influence. I further certify that I am not the Agent designated in this Power of Attorney, nor am I the spouse or child of the Agent.

**Witness Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_

**Print Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

#### **XIV. NOTARY ACKNOWLEDGMENT**

State of Arizona

County of \_\_\_\_\_

On this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, before me personally appeared \_\_\_\_\_ (Name of Principal), whose identity was proven to me on the basis of satisfactory evidence to be the person whose name is subscribed to this document and acknowledged that he/she signed the above/attached document.

(Seal)

**Notary Public Signature:** \_\_\_\_\_

**Print Name:** \_\_\_\_\_

**My Commission Expires:** \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_