

Revocation of Power of Attorney

These Guidance Notes are of a general nature and are not intended to, and cannot, replace the advice of a Legal Practitioner or Registered Conveyancer.

An Enduring Power of Attorney “Do It Yourself” Kit providing more detailed information is available at Service SA. It may be ordered over the Internet at www.shop.service.sa.gov.au

All panels must be completed or struck through. If insufficient space, use approved annexure sheets. If more than one page is used, each must be numbered consecutively, e.g. 1-10, 2-10; 1/10, 2/10; or 1 of 10, 2 of 10.

All handwriting must be clear and legible in permanent, dense, rapid drying black or blue ink.

POWER OF ATTORNEY NUMBER

Show the number of the Power of Attorney to be revoked.

DONOR

Full name and current address to be stated.

DONEE

Full name and current address to be stated.

EXECUTION

The witness must be a disinterested adult.

Print witness’s full name and address below signature.

If the donor is a body corporate, its execution must conform to any prescribed formalities.

FORM RP (Version 4)