

# Nebraska Power of Attorney

## DESIGNATION OF AGENT

I \_\_\_\_\_ (*your name*) name the following person as my agent (individual with power of attorney):

Agent: \_\_\_\_\_

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

Telephone Number: \_\_\_\_\_

## DESIGNATION OF SUCCESSOR AGENT(S) (*OPTIONAL*)

If my agent is unable or unwilling to act for me, I name as my successor agent:

Name of Successor Agent: \_\_\_\_\_

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

Telephone Number: \_\_\_\_\_

If my successor agent is unable or unwilling to act for me, I name as my second successor agent (*OPTIONAL*):

Name of Second Successor Agent: \_\_\_\_\_

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

Telephone Number: \_\_\_\_\_

## RELEASE OF INFORMATION

I agree to, authorize, and allow full release of information, by any governmental agency, business, creditor, or third party who may have information pertaining to my assets or income, to my agent named on this form.

## 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 Nebraska Uniform Power of Attorney Act):

(*CHECK  Yes or  No AND initial for each of the subjects that follow. These subjects represent those you may want to include in the agent's general authority. If you wish to grant general authority over all of the subjects you may check  Yes for "All Preceding Subjects" AND initial that line instead of checking each subject.*)

- Check one:    Initials:
- Yes  No \_\_\_\_\_ Real Property
- Yes  No \_\_\_\_\_ Tangible Personal Property
- Yes  No \_\_\_\_\_ Stocks and Bonds
- Yes  No \_\_\_\_\_ Commodities and Options
- Yes  No \_\_\_\_\_ Banks and Other Financial Institutions
- Yes  No \_\_\_\_\_ Operation of Entity or Business
- Yes  No \_\_\_\_\_ Insurance and Annuities
- Yes  No \_\_\_\_\_ Estates, Trusts, and Other Beneficial Interests Claims and Litigation
- Yes  No \_\_\_\_\_ Personal and Family Maintenance
- Yes  No \_\_\_\_\_ Benefits from Governmental Programs or Civil or Military Service
- Yes  No \_\_\_\_\_ Retirement Plans
- Yes  No \_\_\_\_\_ Taxes
- Yes  No \_\_\_\_\_ All Preceding Subjects (includes all items listed above)

**GRANT OF SPECIFIC AUTHORITY (OPTIONAL)**

My agent **MAY** do any of the following specific acts for me IF I have **CHECKED** 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. CHECK YES AND INTIAL ONLY the specific authority you WANT to give your agent.*

**NOTE: If you do not mark yes and initial the authority, the authority is not granted.)**

- Check one:    Initials:
- Yes  No \_\_\_\_\_ Create, amend, revoke, or terminate an inter vivos trust
- Yes  No \_\_\_\_\_ Make a gift, subject to the limitations of the Nebraska Uniform Power of Attorney Act and any special instructions in this power of attorney
- Yes  No \_\_\_\_\_ Create or change rights of survivorship
- Yes  No \_\_\_\_\_ Create or change a beneficiary designation
- Yes  No \_\_\_\_\_ Delegate to another person to exercise the authority granted under this power of attorney
- Yes  No \_\_\_\_\_ Waive the principal's right to be a beneficiary of a joint and survivor annuity, including a survivor benefit under a retirement plan
- Yes  No \_\_\_\_\_ Exercise fiduciary powers that the principal has authority to delegate
- Yes  No \_\_\_\_\_ Renounce or disclaim an interest in property, including a power of appointment

**LIMITATION ON AGENT'S AUTHORITY**

If I did not check the "Power of Personal and Family Maintenance" or the "All Preceding Subjects" in the Grant of General Authority above, my agent MAY NOT use my property to benefit themselves or anyone they support except for those items listed below in the Special Instructions.

**SPECIAL INSTRUCTIONS (OPTIONAL)**

You may give special instructions on the following lines:

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**NOMINATION OF [CONSERVATOR OR GUARDIAN] (OPTIONAL)**

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

Name of Nominee for conservator of my estate: \_\_\_\_\_

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

Telephone Number: \_\_\_\_\_

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

Name of Nominee for guardian of my person: \_\_\_\_\_

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

Telephone Number: \_\_\_\_\_

**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.

**EFFECTIVE DATE:** This power of attorney is effective immediately unless I have stated otherwise in the special Instructions.

**SIGNATURE AND ACKNOWLEDGMENT**

*(CAUTION: This document MUST be signed IN THE PRESENCE of a notary to comply with the Nebraska Uniform Power of Attorney Act)*

\_\_\_\_\_  
Your Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Your Name Printed

\_\_\_\_\_  
Your Address

\_\_\_\_\_  
Your Telephone Number

**NOTARY**

State of Nebraska )  
 ) ss.  
[County] of \_\_\_\_\_ )

This document was acknowledged before me \_\_\_\_\_,  
(Date)

on by \_\_\_\_\_ .  
(Name of Principal)

\_\_\_\_\_  
Signature of Notary (Seal, if any)

My commission expires: \_\_\_\_\_