



FindLaw<sup>®</sup>

Legal Forms & Services

FirstName LastName

NORTH DAKOTA  
POWER OF ATTORNEY

**DISCLAIMER:**

You use FindLaw's self-help services, forms, and information under your own direction and at your own risk. FindLaw and its affiliates are not a law firm or a substitute for an attorney or law firm and do not represent you or provide legal advice on any matter. The use of FindLaw's self-help services does not create any attorney-client relationship. Communication between you and FindLaw is not protected by attorney-client privilege or as a work product. If you need legal advice or representation, please seek the assistance of an experienced attorney.

The answers you provide in the questionnaire are incorporated in this document at your direction. The form was developed by attorneys based on the laws of your state. You are responsible for finalizing the document and having it reviewed by an attorney.

**Finalizing a Power of Attorney in North Dakota**

After printing your document, you will need to finalize it. Below are the steps:

1. Print out your document
2. Review, initial, sign, and date in front of a notary
3. Have notary sign and date
4. Keep document in a safe place

**Notice:** Some state laws require the principal to initial or sign next to the powers they have granted in order for that power to be effective. To make sure you have initialed and/or signed in the correct places, you should review your form and your state's laws on powers of attorney requirements.

In addition, your agent may be required to verify their authority with a certification or affidavit, or provide specimen signatures before a party will honor your power of attorney.

**NORTH DAKOTA POWER OF ATTORNEY**  
**OF FirstName LastName**

**IMPORTANT INFORMATION**

This power of attorney authorizes another person (your attorney in fact) to make decisions concerning your property for you (the principal). Your attorney in fact will be able to make decisions and act with respect to your property (including your money) whether or not you are able to act for yourself. The meaning of authority over subjects listed on this form is explained in North Dakota Century Code §30.1-30.

This power of attorney does not authorize the attorney in fact to make health care decisions for you.

You should select someone you trust to serve as your attorney in fact. Unless you specify otherwise, generally the attorney in fact's authority will continue until you die or revoke the power of attorney or the attorney in fact resigns or is unable to act for you.

Your attorney in fact is not entitled to any compensation unless you state otherwise in the Special Instructions.

This form provides for designation of one attorney in fact.

If your attorney in fact is unable or unwilling to act for you, your power of attorney will end unless you have named a successor attorney in fact. You may also name a second successor attorney in fact.

This power of attorney shall be durable unless you state otherwise.

This power of attorney becomes effective immediately unless you state otherwise.

**If you have questions about the power of attorney or the authority you are granting to your attorney in fact, you should seek legal advice before signing this form.**

**DESIGNATION OF ATTORNEY IN FACT**

I, FirstName LastName, whose address is 111 Street Address, City, North Dakota 11111, designate and appoint the following person as my attorney in fact:

Name:            FirstName LastName  
Address:        222 Street Address, City, North Dakota 11111  
Phone:         1111111111

**DESIGNATION OF SUCCESSOR ATTORNEY(S) IN FACT**

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

Name:            FirstName LastName  
Address:        333 Street Address, City, North Dakota 11111  
Phone:         1111111111

If my successor attorney in fact is unable or unwilling to act for me, I name as my second successor attorney in fact:

I choose not to name a second successor attorney in fact at this time.

**GRANT OF GENERAL AUTHORITY**

I grant my attorney in fact and any successor attorney in fact general authority to act for me with respect to the following subjects I have initialed:

- \_\_\_\_\_  Real Property
- \_\_\_\_\_  Tangible Personal Property
- \_\_\_\_\_  Stocks and Bonds
- \_\_\_\_\_  Commodities and Options
- \_\_\_\_\_  Banks and Other Financial Institutions
- \_\_\_\_\_  Operation of Entity or Business
- \_\_\_\_\_  Insurance and Annuities
- \_\_\_\_\_  Estates, Trusts, and Other Beneficial Interests
- \_\_\_\_\_  Claims and Litigation

- \_\_\_\_\_  Personal and Family Maintenance
- \_\_\_\_\_  Benefits from Governmental Programs or Civil or Military Service
- \_\_\_\_\_  Retirement Plans
- \_\_\_\_\_  Taxes

**GRANT OF SPECIFIC AUTHORITY**

My attorney in fact SHALL NOT do any of the following specific acts for me UNLESS I have INITIALED the specific authority listed below:

- \_\_\_\_\_  Create, fund, amend, revoke, or terminate an inter vivos trust
- \_\_\_\_\_  Make a gift, subject to the limitations sections 170(c) and 2522(a) of the Internal Revenue Code or corresponding future provisions of federal tax law, or both and any Special Instructions in this power of attorney
- \_\_\_\_\_  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 authority over the content of electronic communications sent or received by the principal
- \_\_\_\_\_  Exercise fiduciary powers that the principal has authority to delegate and that are expressly and clearly identified (including the persons for which the principal acts as a fiduciary) in the Special Instructions
- \_\_\_\_\_  Renounce an interest in property, including a power of appointment

**LIMITATION ON ATTORNEY IN FACT'S AUTHORITY**

An attorney in fact that is not my ancestor, spouse, or descendant MAY NOT use my property to benefit the attorney in fact or a person to whom the attorney in fact owes an obligation of support.

**SPECIAL INSTRUCTIONS**

Revocation. All my previously executed powers of attorney are hereby revoked.

Compensation. My agent is entitled to reasonable compensation for actions taken pursuant to this power of attorney.

Special Instructions. I have no other instructions at this time.

**EFFECTIVE DATE**

This power of attorney is effective immediately and shall not be affected by disability of the principal.

**NOMINATION OF GUARDIAN OF ESTATE**

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

Name:            FirstName LastName  
Address:        222 Street Address, City, North Dakota 11111  
Phone:           1111111111

**NOMINATION OF GUARDIAN OF PERSON**

Name:            FirstName LastName  
Address:        333 Street Address, City, North Dakota 11111  
Phone:           1111111111

**RELIANCE ON THIS POWER OF ATTORNEY**

Any person, including my attorney in fact, may rely upon the validity of this power of attorney or a copy of it unless that person has actual knowledge it has terminated or is invalid.

**REVOCAATION**

This power of attorney may be revoked by the principal at any time that the principal has a capacity to do so. Any revocation must be in writing and delivered to the named attorney in fact.

**SIGNATURE AND ACKNOWLEDGMENT**

\_\_\_\_\_  
FirstName LastName

\_\_\_\_\_  
Date

111 Street Address, City, North Dakota 11111

1111111111

Signed and sworn to before me on: \_\_\_\_\_, 20\_\_ by FirstName  
LastName.

State of \_\_\_\_\_

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

This document was signed or acknowledged in my presence on \_\_\_\_\_ by  
FirstName LastName.

\_\_\_\_\_  
Notary Public or Clerk of Court (Seal)

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

## **IMPORTANT INFORMATION FOR ATTORNEY IN FACT**

### **Attorney in Fact's Duties**

When you accept the authority granted under this power of attorney, a special legal relationship is created between you and the principal. This relationship imposes upon you legal duties that continue until you resign or the power of attorney is terminated or revoked. You must:

- (1) Do what you know the principal reasonably expects you to do with the principal's property or, if you do not know the principal's expectations, act in the principal's best interest;
- (2) Act in good faith;
- (3) Do nothing beyond the authority granted in this power of attorney; and
- (4) Disclose your identity as an attorney in fact whenever you act for the principal by writing or printing the name of the principal and signing your own name as "attorney in fact" in the following manner:

FirstName LastName by (Your signature) as Attorney in fact.

Unless the Special Instructions in this power of attorney state otherwise, you must also:

- (1) Act loyally for the principal's benefit;
- (2) Avoid conflicts that would impair your ability to act in the principal's best interest;
- (3) Act with care, competence, and diligence;
- (4) Keep a record of all receipts, disbursements, and transactions made on behalf of the principal;
- (5) Cooperate with any person that has authority to make health care decisions for the principal to do what you know the principal reasonably expects or, if you do not know the principal's expectations, to act in the principal's best interest; and
- (6) Attempt to preserve the principal's estate plan if you know the plan and preserving the plan is consistent with the principal's best interest.

### **Termination of Attorney in Fact's Authority**

You must stop acting on behalf of the principal if you learn of any event that terminates this power of attorney or your authority under this power of attorney. Events that terminate a power of attorney or your authority to act under a power of attorney include:

- (1) Death of the principal;
- (2) The principal's revocation of your authority or the power of attorney;
- (3) The occurrence of a termination event stated in the power of attorney;
- (4) The purpose of the power of attorney is fully accomplished; or



(5) If you are married to the principal, a legal action is filed with a court to end your marriage, or for your legal separation, unless the Special Instructions in this power of attorney state that such an action will not terminate your authority.

**Liability of Attorney in Fact**

The meaning of the authority granted to you is defined in North Dakota Century Code §30.1-30. If you violate North Dakota Century Code §30.1-30 or act outside the authority granted, you may be liable for any damages caused by your violation.

**If there is anything about this document or your duties that you do not understand, you should seek legal advice.**