# TEXAS LIMITED (SPECIAL) POWER OF ATTORNEY

NOTICE: THE POWERS GRANTED BY THIS DOCUMENT ARE EXPLAINED IN THE DURABLE POWER OF ATTORNEY ACT, SUBTITLE P, TITLE 2, ESTATES CODE.1 IF YOU HAVE ANY QUESTIONS ABOUT THESE POWERS, OBTAIN COMPETENT LEGAL ADVICE. THIS DOCUMENT DOES NOT AUTHORIZE ANYONE TO MAKE MEDICAL AND OTHER HEALTH-CARE DECISIONS FOR YOU. YOU MAY REVOKE THIS POWER OF ATTORNEY IF YOU LATER WISH TO DO SO. IF YOU WANT YOUR AGENT TO HAVE THE AUTHORITY TO SIGN HOME EQUITY LOAN DOCUMENTS ON YOUR BEHALF, THIS POWER OF ATTORNEY MUST BE SIGNED BY YOU AT THE OFFICE OF THE LENDER, AN ATTORNEY AT LAW, OR A TITLE COMPANY.

You should select someone you trust to serve as your agent. Unless you specify otherwise, generally the agent's authority will continue until:

(1) you die or revo	ke the power of attorney;	
(2) your agent resi	gns, is removed by court order, or is unable to act for yo	ou; or
(3) a guardian is a	ppointed for your estate.	
I,	[Principal name] at	[Address]
	[Agent name] at	
[Address]		
(Optional)		
AND	[Co-agent name] at	
[Address]		
, ,	co-agents to act for me in any lawful way with respect	•
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OTHERWISE, CO-AGENTS MAY ACT INDEPENDENTLY.)



# **GRANT OF AUTHORITY**

SPECIAL INSTRUCTIONS
Special instructions applicable to agent compensation (initial in front of one of the following sentences to have it apply; if no selection is made, each agent will be entitled to compensation that is reasonable under the circumstances):
My agent is entitled to reimbursement of reasonable expenses incurred on my behalf and to compensation that is reasonable under the circumstances.
My agent is entitled to reimbursement of reasonable expenses incurred on my behalf but shall receive no compensation for serving as my agent.
Special instructions applicable to co-agents (if you have appointed co-agents to act, initial in front of one of the following sentences to have it apply; if no selection is made, each agent will be entitled to act independently):
Each of my co-agents may act independently for me.
My co-agents may act for me only if the co-agents act jointly.
My co-agents may act for me only if a majority of the co-agents act jointly.
Special instructions applicable to gifts (initial in front of the following sentence to have it apply):
I grant my agent the power to apply my property to make gifts outright to or for the benefit of a person, including by the exercise of a presently exercisable general power of appointment held by me, except that the amount of a gift to an individual may not exceed the amount of annual exclusions allowed from the federal gift tax for the calendar year of the gift.



ON THE FOLLOWING LINES YOU MAY GIVE SPECIAL INSTRUCTIONS LIMITING OR EXTENDING THE POWERS GRANTED TO YOUR AGENT.
EFFECTIVENESS
(Check one)
$\hfill\Box$ This power of attorney is effective immediately and will continue until it is revoked.
THIS POWER OF ATTORNEY BECOMES EFFECTIVE UPON MY DISABILITY OR INCAPACITY. If a definition of my disability or incapacity is not contained in this power of attorney, I shall be considered disabled or incapacitated for purposes of this power of attorney if a physician certifies in writing at a date later than the date this power of attorney is executed that, based on the physician's medical examination of me, I am mentally incapable of managing my financial affairs. I authorize the physician who examines me for this purpose to disclose my physical or mental condition to another person for purposes of this power of attorney. A third party who accepts this power of attorney is fully protected from any action taken under this power of attorney that is based on the determination made by a physician of my disability or incapacity.
☐ THIS POWER OF ATTORNEY BECOMES EFFECTIVE ON
□ OTHER:
<u>Durability</u> (Check one)
☐ DURABLE Power of Attorney. This power of attorney is not affected by my subsequent disability or incapacity.
☐ REGULAR Power of Attorney. This power of attorney shall terminate if I become disabled or incapacitated.

If a definition of my disability or incapacity is not contained in this power of attorney, I shall be considered disabled or incapacitated for purposes of this power of attorney if a physician certifies in writing at a date later than the date this power of attorney is executed that, based on the physician's medical examination of me, I am mentally incapable of managing my financial affairs. I authorize the physician who examines me for this purpose to disclose my physical or mental condition to another person for purposes of this power of attorney. A third party who accepts this power of attorney is fully protected from any action taken under this power of attorney that is based on the determination made by a physician of my disability or incapacity.



I agree that any third party who receives a copy of this document may act under it. Termination of this power of attorney is not effective as to a third party until the third party has actual knowledge of the termination. I agree to indemnify the third party for any claims that arise against the third party because of reliance on this power of attorney. The meaning and effect of this power of attorney is determined by Texas law.

If any agent named by me dies, becomes incapacitated, resigns, refuses to act, or is removed by court order, or if my marriage to an agent named by me is dissolved by a court decree of divorce or annulment or is declared void by a court (unless I provided in this document that the dissolution or declaration does not terminate the agent's authority to act under this power of attorney), I name the following (each to act alone and successively, in the order named) as successor(s) to that agent:

Successor Agent's Full N	lame	
Successor Agent's Street	t Address	
City	State	Zip Code
Successor Agent's Phone	e Number	
Second Successor Agen	<b>t's</b> Full Name	
Second Successor Agen	<b>t's</b> Street Address	
City	State	Zip Code
Second Successor Agen	<b>t's</b> Phone Number	

# SIGNATURE AND ACKNOWLEDGMENT

Signed this day of	, 20
Principal's Signature	
Principal's Name	



State of Texas	
County of	
This document was acknowledged before me on	(date) by
Signature of Notarial Officer	
(Seal, if any)	
Notarial Officer Name:	
My commission expires:	



### IMPORTANT INFORMATION FOR AGENT

### **Agent's Duties**

When you accept the authority granted under this power of attorney, you establish a "fiduciary" relationship with the principal. This is a special legal relationship that imposes on you legal duties that continue until you resign or the power of attorney is terminated, suspended, or revoked by the principal or by operation of law. A fiduciary duty generally includes the duty to:

- (1) act in good faith;
- (2) do nothing beyond the authority granted in this power of attorney;
- (3) act loyally for the principal's benefit;
- (4) avoid conflicts that would impair your ability to act in the principal's best interest; and
- (5) disclose your identity as an agent when you act for the principal by writing or printing the name of the principal and signing your own name as "agent" in the following manner:

(Tillicipal's Name) by(Total digitative) as Agent	(Principal's Name) by	(Your Signature) a	s Agent
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In addition, the Durable Power of Attorney Act (Subtitle P, Title 2, Estates Code) requires you to:

- (1) maintain records of each action taken or decision made on behalf of the principal;
- (2) maintain all records until delivered to the principal, released by the principal, or discharged by a court; and
- (3) if requested by the principal, provide an accounting to the principal that, unless otherwise directed by the principal or otherwise provided in the Special Instructions, must include:
  - (A) the property belonging to the principal that has come to your knowledge or into your possession:
  - (B) each action taken or decision made by you as agent;
  - (C) a complete account of receipts, disbursements, and other actions of you as agent that includes the source and nature of each receipt, disbursement, or action, with receipts of principal and income shown separately;
  - (D) a listing of all property over which you have exercised control that includes an adequate description of each asset and the asset's current value, if known to you;
  - (E) the cash balance on hand and the name and location of the depository at which the cash balance is kept;
  - (F) each known liability;
  - (G) any other information and facts known to you as necessary for a full and definite understanding of the exact condition of the property belonging to the principal; and
  - (H) all documentation regarding the principal's property.

### **Termination of Agent'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. An event that terminates this power of attorney or your authority to act under this power of attorney includes:

- (1) the principal's death;
- (2) the principal's revocation of this power of attorney or your authority;
- (3) the occurrence of a termination event stated in this power of attorney;



- (4) if you are married to the principal, the dissolution of your marriage by a court decree of divorce or annulment or declaration that your marriage is void, unless otherwise provided in this power of attorney;
- (5) the appointment and qualification of a permanent guardian of the principal's estate; or
- (6) if ordered by a court, your removal as agent (attorney in fact) under this power of attorney. An event that suspends this power of attorney or your authority to act under this power of attorney is the appointment and qualification of a temporary guardian unless a court order provides otherwise.

## **Liability of Agent**

The authority granted to you under this power of attorney is specified in the Durable Power of Attorney Act (Subtitle P, Title 2, Estates Code). If you violate the Durable Power of Attorney Act or act beyond the authority granted, you may be liable for any damages caused by the violation or subject to prosecution for misapplication of property by a fiduciary under Chapter 32 of the Texas Penal Code.

THE AGENT, BY ACCEPTING OR ACTING UNDER THE APPOINTMENT, ASSUMES THE FIDUCIARY AND OTHER LEGAL RESPONSIBILITIES OF AN AGENT.

### SIGNATURE AND ACKNOWLEDGMENT OF AGENT/CO-AGENTS

Signed this day of	, 20
Agent/Co-Agent's Signature	
Agent/Co-Agent's Name	
Agent/Co-Agent's Name	
Co-Agent's Signature	
Oo A ventle News	
Co-Agent's Name	



# CERTIFICATION OF POWER OF ATTORNEY BY AGENT/CO-AGENT

I,, certify under penalty of perjury that:
I am the agent named in the power of attorney validly executed by
("principal") on (date), and the power of attorney is now in full force and effect.  2. The principal is not deceased and is presently domiciled in,
2. The principal is not deceased and is presently domiciled in,
Texas.
3. To the best of my knowledge after diligent search and inquiry:
a. The power of attorney has been revoked by the principal or suspended or terminated by the
occurrence of any event, whether or not referenced in the power of attorney;
b. At the time the power of attorney was executed, the principal was mentally competent to transact
legal matters and was not acting under the undue influence of any other person;
c. A permanent guardian of the estate of the principal has not qualified to serve in that capacity;
d. My powers under the power of attorney have not been suspended by a court in a temporary
guardianship or other proceeding;
e. If I am (or was) the principal's spouse, my marriage to the principal has not been dissolved by court
decree of divorce or annulment or declared void by a court, or the power of attorney provides
specifically that my appointment as the agent for the principal does not terminate if my marriage to the
principal has been dissolved by court decree or annulment or declared void by a court; f. No proceeding has been commenced for a temporary or permanent guardianship of the person or
estate, or both, of the principal; and
g. The exercise of my authority is not prohibited by another agreement or instrument.
4. If under its terms the power of attorney becomes effective on the disability or incapacity of the principal
or at a future time or on the occurrence of a contingency, the principal now has a disability or is
incapacitated or the specified future time or contingency has occurred.
5. I am acting within the scope of my authority under the power of attorney, and my authority has not
been altered or terminated.
6. If applicable, I am the successor to (predecessor agent), who has
resigned, died, or become incapacitated, is not qualified to serve or has declined to serve as agent, or is
otherwise unable to act. There are no unsatisfied conditions remaining under the power of attorney that
preclude my acting as successor agent.
7. I agree not:
a. Exercise any powers granted by the power of attorney if I attain knowledge that the power of
attorney has been revoked, suspended, or terminated; or
b. Exercise any specific powers that have been revoked, suspended, or terminated.
8. A true and correct copy of the power of attorney is attached to this document.
9. If used in connection with an extension of credit under Section 50(a)(6), Article XVI, Texas Constitution
the power of attorney was executed in the office of the lender, the office of a title company, or the law
office of
Date:, 20
Signature of



# CERTIFICATION OF POWER OF ATTORNEY BY CO-AGENT

I,, certify under penalty of perjury that:
I am the agent named in the power of attorney validly executed by
("principal") on (date), and the power of attorney is now in full force and effect.  2. The principal is not deceased and is presently domiciled in,
2. The principal is not deceased and is presently domiciled in,
Texas.
3. To the best of my knowledge after diligent search and inquiry:
a. The power of attorney has been revoked by the principal or suspended or terminated by the
occurrence of any event, whether or not referenced in the power of attorney;
b. At the time the power of attorney was executed, the principal was mentally competent to transact
legal matters and was not acting under the undue influence of any other person;
c. A permanent guardian of the estate of the principal has not qualified to serve in that capacity;
d. My powers under the power of attorney have not been suspended by a court in a temporary
guardianship or other proceeding;
e. If I am (or was) the principal's spouse, my marriage to the principal has not been dissolved by court
decree of divorce or annulment or declared void by a court, or the power of attorney provides
specifically that my appointment as the agent for the principal does not terminate if my marriage to the
principal has been dissolved by court decree or annulment or declared void by a court; f. No proceeding has been commenced for a temporary or permanent guardianship of the person or
estate, or both, of the principal; and
g. The exercise of my authority is not prohibited by another agreement or instrument.
4. If under its terms the power of attorney becomes effective on the disability or incapacity of the principal
or at a future time or on the occurrence of a contingency, the principal now has a disability or is
incapacitated or the specified future time or contingency has occurred.
5. I am acting within the scope of my authority under the power of attorney, and my authority has not
been altered or terminated.
6. If applicable, I am the successor to (predecessor agent), who has
resigned, died, or become incapacitated, is not qualified to serve or has declined to serve as agent, or is
otherwise unable to act. There are no unsatisfied conditions remaining under the power of attorney that
preclude my acting as successor agent.
7. I agree not:
a. Exercise any powers granted by the power of attorney if I attain knowledge that the power of
attorney has been revoked, suspended, or terminated; or
b. Exercise any specific powers that have been revoked, suspended, or terminated.
8. A true and correct copy of the power of attorney is attached to this document.
9. If used in connection with an extension of credit under Section 50(a)(6), Article XVI, Texas Constitution
the power of attorney was executed in the office of the lender, the office of a title company, or the law
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Date:, 20
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Signature of

