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| **U. S. DEPARTMENT OF HOMELAND SECURITY**  U. S. Coast Guard  Training Center Cape May  Legal Form 5801B (Rev. 07-11) | | **APPLICATION FOR GENERAL POWERS OF ATTORNEY** | | | | | | | | | | |
| **AUTHORITY:** COMDTINST 5801.4(series)  **PRINCIPLE PURPOSE:** To collect information to properly prepare a General Power of Attorney for service personnel and their dependents as requested.  **USED:** The information you provide will be used by the personnel of this legal office to assign as attorney to you, to prepare a power of attorney, to monitor progress achieved toward the preparation and execution of your power of attorney and to provide periodic workload productivity and statistical reports.  **DISCLOSURE:** Individuals seeking legal assistance are required to provide personal information. The information you are required to provide is solicited on a voluntary basis; however, failure to provide the required information could result in this office being unable to provide the desired power of attorney. | | | | | | | | | | | | |
| **1. GRANTOR’S INFORMATION** *(Party giving power)* | | | | | | | | | | | | |
| a. Full Name (Last, First, Middle): | | | | b. Rank/Rate: | c. Permanent Unit: | | | | | | | d. EMPLID: |
| e. Status (Active/Retired/Dependent): | f. If dependent, please list Sponsor’s Full Name (Last, First, Middle): | | | | | | | g. Relationship to Sponsor: | | | | |
| h. State of Legal Residence: | i. Current Residing Address: | | | | | | | | | j. Telephone Number: | | |
| **2. GRANTEE’S INFORMATION** *(Party receiving power)* | | | | | | | | | | | | |
| a. Full Name (Last, First, Middle): | | | | b. Relationship to Grantor: | | c. Current Address: | | | | | | |
| **3. IMPORTANT INFORMATION** | | | | | | | | | | | | |
| 1. **This Legal Assistance Office strongly discourages the granting of a General Power of Attorney. In order to receive a General Power of Attorney, you must read the following information and acknowledge that you have been advised by this office that granting a General Power of Attorney may likely be against your best interest.** 2. A General Power of Attorney gives broad powers and authority to whomever you delegate as your attorney-in-fact. A General Power of Attorney can be very dangerous in the hands of a person who is inexperienced in business matters, persons of unstable temperament, or anyone whom you do not have the utmost trust and confidence in. 3. With a General Power of Attorney, your attorney-in-fact is authorized to act on your behalf in any matter. With a General Power of Attorney, your agent could sell or mortgage your home, sell your car, buy a car in your name, withdraw money from your bank accounts, borrow money in your name which you would then be responsible to repay, sign your name to contracts, order a credit card in your name and then charge any debts on it, etc… Essentially, your agent is authorized to do anything you could do personally, and those acts would be legally binding. 4. General Powers of Attorney can cause problems for a husband and wife who are having marital problems because either party can misuse the General Power of Attorney to cause financial harm to their spouse. General Powers of Attorney are also a source of problems between friends who may misuse the General Power of Attorney to the financial and legal detriment of you, the grantor. 5. It is recommended that you grant no more authority to your attorney-in-fact than what is absolutely necessary. We advise that you grant a Special Power of Attorney, which will enable your agent to act on your behalf in specific instances. If, after reading this, you still wish to grant a General Power of Attorney, please read the disclosure statement below, and sign where indicated. 6. An appointment is required for counseling by the Staff Judge Advocate upon notarization of the General Power of Attorney. Please contact the Legal Assistance Office at (609) 898-6902 to set up an appointment. | | | | | | | | | | | | |
| **4. GENERAL PURPOSE** | | | | | | | | | | | | |
| a. Please list the overall purpose(s) as to why you are requesting a General Power of Attorney: | | | | | | | | | | | | |
| b. Date of Request (DDMMMYYYY): | | | c. Date Needed by (DDMMMYYYY): | | | | | | d. Termination Date, 1 Year Maximum (DDMMMYYYY): | | | |
| **5. ACKNOWLEDGEMENT** | | | | | | | | | | | | |
| 1. **I have read the above information, understand the same, and acknowledge that I have been advised by this Legal Assistance Office that granting a General Power of Attorney may be dangerous and against my financial and legal interest.** | | | | | | | | | | | | |
| Grantor’s Signature: | | | | Date: | | | **For Legal Assistance Office Use Only** | | | | | |
| Staff Judge Advocate Approval: | | | | Date: | | | Date Drafted (DDMMMYYYY): | | | | Date Notarized (DDMMMYYYY): | |

U.S. DEPT OF HOMELAND SECURITY, USCG TRACEN CAPE MAY, LEGAL FORM 5801B (Rev. 07-11)