



General POA No.	Valid Until <sup>(iii)</sup>

**KNOW ALL MEN BY THESE PRESENTS THAT I, (APPOINTOR)<sup>(i)</sup>**

First name/s	Surname	DOB
Address	Phone	Email

am desirous of appointing an attorney to attend to certain matters on my behalf in the Cook Islands

**AND I HEREBY NOMINATE CONSTITUTE AND APPOINT (APPOINTEE)<sup>(ii)\*</sup>**

First name/s	Surname	DOB
Address	Phone	Email

**\* NOTE: MUST reside in the Cook Islands**

**1. MY ATTORNEY** shall have the exclusive right to act for me in my name and on my behalf in all land matters or interest whatsoever kind or nature and wheresoever situated in which I have an interest or be in any way connected, interested or concerned whether solely or otherwise.

**2. MY ATTORNEY** shall also be authorised by these presents to attend, speak, vote, execute, approve, decline or simply sign any matter or process relating to a landowners meeting pursuant to the provision of the Cook Islands Land (Facilitation of Dealings) Act 1970 and its Amendments and shall also be authorised by these presents to appear either to prosecute, defend or appeal for or against any matter or proceedings before any Court in which I have an interest.

**AND I DECLARE** that no person or persons, corporation or corporations dealing with my attorney shall be concerned to see or enquire as to the propriety or expediency of any matter, act, deed or thing which my attorney may do or agree to do or perform in name by virtue of these presents.

**AND I DECLARE** that whatsoever my attorney shall do or perform to be done by virtue of these presents **I HEREBY AGREE** to allow, ratify and confirm.

**AND I DECLARE** that this authority shall be deemed to remain in full force for a term of up to five (5) years from the date of registration, or unless sooner cancelled or revoked<sup>(iii)</sup>.

**AND I DECLARE** the above information to be true and correct.

**DECLARED** at \_\_\_\_\_ this \_\_\_\_\_ day of \_\_\_\_\_ 2018

\_\_\_\_\_  
**Signature of Appointor<sup>(i)</sup>**

\_\_\_\_\_  
**Witness (Deputy) Registrar/Justice of the Peace/Solicitor**

OFFICE USE ONLY																
<p><b>PROOF OF IDENTITY</b>                  Each Appointor<sup>(i)</sup> and Appointee<sup>(ii)</sup> MUST provide certified true copies of at least two of the following; whereby one must include a current Photo-ID:</p> <table border="1"> <tr> <td>(i)</td> <td>(ii)</td> <td>Passport</td> </tr> <tr> <td> </td> <td> </td> <td>Driver Licence</td> </tr> <tr> <td> </td> <td> </td> <td>Birth Certificate</td> </tr> <tr> <td> </td> <td> </td> <td>Marriage Certificate</td> </tr> <tr> <td> </td> <td> </td> <td>Other (please state)</td> </tr> </table>	(i)	(ii)	Passport			Driver Licence			Birth Certificate			Marriage Certificate			Other (please state)	<p><b>PAYMENT DETAIL</b></p> <p>Fee: NZD \$25.00</p> <p>Receipt No: _____</p> <p>Date: _____</p> <p>Officer: _____</p>
(i)	(ii)	Passport														
		Driver Licence														
		Birth Certificate														
		Marriage Certificate														
		Other (please state)														