



Special POA No.	Valid Until ⁽ⁱⁱⁱ⁾
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KNOW ALL MEN BY THESE PRESENTS that I, (APPOINTOR)⁽ⁱ⁾

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)⁽ⁱⁱ⁾*

First name/s	Surname	DOB
Address	Phone	Email

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

(hereinafter called "my attorney") to do all such things as I could do if personally present in the manner hereinafter set forth:

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⁽ⁱⁱⁱ⁾.

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

DECLARED at _____ this _____ day of _____ 2019

Signature of Appointor⁽ⁱ⁾

Witness (Deputy) Registrar/Justice of the Peace/Solicitor

OFFICE USE ONLY

PROOF OF IDENTITY

Each Appointor⁽ⁱ⁾ and Appointee⁽ⁱⁱ⁾ MUST provide certified true copies of at least two of the following; whereby one must include a current Photo-ID:

(i)	(ii)	
		Passport
		Driver Licence
		Birth Certificate
		Marriage Certificate
		Other (please state)

PAYMENT DETAIL

Fee: NZD \$25.00
Receipt No: _____
Date: _____
Officer: _____