**DURABLE STATUTORY POWER OF ATTORNEY – LONG FORM**

**Notice: The powers granted by this document are broad and sweeping. They are defined in the Connecticut Uniform Power of Attorney Act, which expressly permits the use of any other or different form of power of attorney desired by the parties concerned. The grantor of any power of attorney, the agent or such other person or entities as authorized by statute may make application to a Probate Court for an accounting as provided in subsection (d) of Section 45a-175 of the general statutes. This power of attorney does not authorize the agent to make health care decisions for you.**

Know All Persons by These Presents, which are intended to constitute a GENERAL POWER OF ATTORNEY pursuant to the Connecticut Uniform Power of Attorney Act:

That I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(insert name and address of the principal)

do hereby appoint \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(insert name and address of the agent, or each agent, if more than one is designated)

my agent(s) TO ACT **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

(If more than one agent is designated and the principal wishes each agent alone to be able to exercise the power conferred, insert in this blank the word ‘**severally**’. Failure to make any insertion or the insertion of the word ‘jointly’ shall require the agents to act **jointly**.)

**First:** In my name, place and stead in any way which I myself could do, if I were personally present, with respect to the following matters as each of them is defined in the Connecticut Uniform Power of Attorney Act to the extent that I am permitted by law to act through an agent:

*(Strike out and initial in the opposite box any one or more of the subparagraphs as to which*

*the principal does NOT desire to give the agent authority. Such elimination of any one or more of subparagraphs (A) to (M), inclusive, shall automatically constitute an elimination also of subparagraph (N)).*

*To strike out any subparagraph the principal must draw a line through the text of that subparagraph AND write his initials in the box opposite.*

(A) Real property; ( )

(B) Tangible personal property; ( )

(C) Stocks and bonds; ( )

(D) Commodities and options; ( )

(E) Banks and other financial institutions; ( )

(F) Operation of entity or business; ( )

(G) Insurance and annuities; ( )

(H) Estates, trusts and other beneficial interests; ( )

(I) Claims and litigation; ( )

(J) Personal and family maintenance; ( )

(K) Benefits from governmental programs or civil or military service; ( )

(L) Retirement plans; ( )

(M) Taxes; ( )

(N) All other matters; ( )

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Special provisions and limitations may be included in the statutory form   
power of attorney only if they conform to the requirements of the

Connecticut Uniform Power of Attorney Act.)

**OPTIONAL ESTATE PLANNING POWERS**

**YOU SHOULD SEEK LEGAL ADVICE BEFORE INCLUDING THE FOLLOWING POWERS:**

**(CAUTION: Granting any of the following will give your agent the authority to take actions that could significantly reduce your property or change how your property is distributed at your death.)**

**My agent MAY NOT do any of the following specific acts UNLESS I HAVE INITIALED the specific authority listed below:**

(O) Create, amend, revoke or terminate an inter vivos trust, ( )

provided in the case of a trust established for a disabled person

pursuant to 42 USC 1396p(d)(4)(A) or 42 USC 1396p(d)(4)(C),

the creation of such trust by an agent shall be only as permitted

by federal law;

(P) Make a gift, subject to the limitations of the Connecticut ( )

Uniform Power of Attorney Act and any special instructions in

this power of attorney. Unless otherwise provided in the special

instructions, gifts per recipient may not exceed the annual dollar

limits of the federal gift tax exclusion under the Internal Revenue

Code Section 2503(b), or if the principal’s spouse agrees to consent

to a split gift pursuant to Internal Revenue Code Section 2513, in

an amount per recipient not to exceed twice the annual federal gift

tax exclusion limit. In addition, an agent must determine that gifts

are consistent with the principal’s objectives if actually known by

the agent and, if unknown, as the agent determines is consistent

with the principal’s best interest based on all relevant factors;

(Q) Create or change rights of survivorship; ( )

(R) Create or change a beneficiary designation; ( )

(S) Waive the principal's right to be a beneficiary of a joint ( )

and survivor annuity, including a survivor benefit under

a retirement plan;

(T) Exercise fiduciary powers that the principal has authority ( )

to delegate;

(U) Disclaim or refuse an interest in property, including a ( )  
power of appointment.

(V) Exercise all powers I may have over any digital device, ( )

digital asset, user account and electronically stored information,

including any user account and digital asset that currently exists

or may exist as technology develops, whether the same is in my own

name or that I own or lawfully use jointly with any other individual;

such powers include, but are not limited to, changing and circumventing

my username and password to gain access to such user accounts and

information; transferring or withdrawing funds or other digital assets

among or from such user accounts; opening new user accounts in

my name; all as my agent determines is necessary or advisable. I hereby

give my lawful consent and fully authorize my agent to

access, manage, control, delete and terminate any electronically stored

information and communications of mine to the fullest extent allowable

under the federal Electronic Communications Privacy Act of 1986,

18 USC 2510 et seq., as amended from time to time, the

Connecticut Revised Uniform Fiduciary Access to Digital Assets Act

and any other federal, state or international privacy law or

other law and to take any actions I am authorized to take under all

applicable terms of service, terms of use, licensing and other account

agreements or laws. To the extent a specific reference to

any federal, state, local or international law is required in order to

give effect to this provision, I specifically provide that my intention

is to so reference such law, whether such law is now in existence or

comes into existence or is amended after the date of this document.

(W) With respect to any intellectual property interests of ( )

mine, including, without limitation, copyrights, contracts for

payments of royalties and trademarks, act in all ways with respect to

such interests as if my agent were the owner thereof, including,

without limitation, registering ownership, transferring ownership

and recording documents to effectuate or memorialize such transfer,

granting and revoking licenses, entering, terminating and enforcing

agreements, defending ownership and conferring agency upon

professionals to represent my interests before governmental agencies,

and in general, to exercise all powers with respect to the intellectual

property that I could exercise if present.

**Second:** **LIMITATION ON AGENT'S AUTHORITY**

An agent MAY NOT use my property to benefit the agent or a dependent of the agent, except to the extent that I have included such authority elsewhere in this document.

**Third:** With full and unqualified authority to exercise or delegate any or all of the foregoing powers granted under this power of attorney to any person or persons whom my agent(s) shall select.

**Fourth:** Hereby ratifying and confirming all that said agent(s) or substitute(s) do or cause to be done.

**Fifth:** **DESIGNATION OF SUCCESSOR AGENT(S) (OPTIONAL)**

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

Name of Successor Agent: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Successor Agent’s Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

Name of Second Successor Agent: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Second Successor Agent’s Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Sixth:** **DESIGNATION OF CONSERVATOR OF ESTATE (OPTIONAL)**  If a conservator of my estate should be appointed, I designate that \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ be appointed to serve as conservator of my estate. If \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ is unable to serve or cease to serve as conservator of my estate, I designate that \_\_\_\_\_\_\_\_\_\_\_\_\_\_ be appointed to serve as conservator of my estate.

I direct that bond for the conservator of my estate, including any sureties thereon \_\_\_\_\_ be required \_\_\_\_\_ not be required.

**Seventh:** **EFFECTIVE DATE** This power of attorney is effective immediately unless I have stated otherwise in the special instructions.

The execution of this statutory long form power of attorney shall be duly acknowledged by the principal in the manner prescribed for the acknowledgment of a conveyance of real property.

**In Witness Whereof** I have hereunto signed my name and affixed my seal this \_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_, 20\_\_.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Witness Principal

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Witness

STATE OF CONNECTICUT )

) ss. Woodbury

COUNTY OF )

On this the \_\_\_\_\_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_\_, 20\_\_, before me, (name of Principal), signer of the foregoing instrument, personally appeared, and acknowledged the execution of such instrument to be his/her free act and deed.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Commissioner of the Superior Court

Notary Public

My Commission Expires: