

Annex A: Supporting information for property and financial affairs applications

For office use only
Case no. (if known)
Date received

Full name of person to whom the application relates (this is the name of the person who lacks, or is alleged to lack, capacity)

Please refer to COP1A guidance before completing this form. It is important that this annex form is fully completed. If you do not have enough information you should consider asking for an interim order authorising you to obtain information from banks and other financial institutions.

Please note: This annex must be submitted with COP1.

Section 1 - Your details (the applicant) and details of any proposed deputies

1.1 (a) Applicant 1

Proposed deputy? Yes No

Mr. Mrs. Miss Ms. Other _____

First name(s)

Last name

(b) Applicant 2

Proposed deputy? Yes No

Mr. Mrs. Miss Ms. Other _____

First name(s)

Last name

If applicable, additional proposed deputies

(c) Proposed deputy

Mr. Mrs. Miss Ms. Other _____

First name(s)

Last name

(d) Proposed deputy

Mr. Mrs. Miss Ms. Other _____

First name(s)

Last name

1.2

Sole deputyship Joint deputyship Joint and several deputyship

Section 2 - Enduring power of attorney or lasting power of attorney

2.1 Has the person to whom the application relates granted a power of attorney, enduring power of attorney or lasting power of attorney?

Yes No

Don't know

If Yes, please state which type(s) the date granted and the date registered (if known).

	Date made	Date registered
<input type="checkbox"/> Enduring power of attorney	<input type="text"/>	<input type="text"/>
<input type="checkbox"/> Lasting power of attorney property and financial affairs	<input type="text"/>	<input type="text"/>
<input type="checkbox"/> Lasting power of attorney health and welfare	<input type="text"/>	<input type="text"/>

2.2 Please state the name(s) and address(es) of the attorney(s) named in the power of attorney

Attorney 1

Name

Address

Attorney 2

Name

Address

Attorney 3

Name

Address

2.3 Has the power of attorney been registered?

Yes No

Don't know

If Yes, please explain why the appointment of a deputy is sought

If No, please explain why an application to register the power of attorney has not been made

Section 3 - Will

3.1 Has the person to whom the application relates made a will? Yes No

If Yes, please attach a copy if possible. Not known

3.2 If you cannot obtain a copy of the will but you know who holds a copy, please give their name and contact details.

3.3 Do you seek authority to obtain a copy of the will? Yes No

3.4 If known, please provide the names of the executor(s) of the will

Section 4 - Income and assets

4.1 What is the national insurance number of the person to whom the application relates?

letters	numbers	letter

4.2 Is the person to whom the application relates entitled to any benefits? Yes No

If Yes, are the benefits received by the person to whom the application relates? Yes No

If No, please give details of who receives the benefits:

4.3 Please give details below of all income including social security benefits that the person to whom the application relates is entitled.

Income	Annual amount
Earnings	£
Occupational pension	£
Other pensions	£
Annuities	£
Other income	£
Trust	£
Interest	£
Investment income	£
	£
	£
Total	£

Social security benefits	Annual amount
State retirement pension	£
Pension credit	£
Attendance allowance	£
Severe disablement allowance	£
Disability living allowance	£
Incapacity benefit	£
Income support	£
Council tax benefit	£
Child benefit	£
Other benefits	£
Total	£

Interest in a deceased's estate

4.4 Does the person to whom the application relates have any interest in the estate of someone who has died? Yes No

If No, go to Section 4.5

Name of deceased

Name of executor/administrator

Approximate value of interest in estate

Is an order required to allow the proposed deputy to obtain a grant in order to deal with the estate of the deceased? Yes No

Damages and criminal injuries compensation

4.5 Has a claim been made for an award for damages or, for compensation from the Criminal Injuries Compensation Authority or is such a claim likely to be made? Yes No
If No, go to Section 4.8

If Yes, please give details, including the name and address of solicitors involved, the present position regarding the litigation, the likely value of the claim and details of any interim payments that have been, or are going to be, made.

4.6 If a final award has been made please provide details Copy of final order enclosed

4.7 If the award is in excess of £500,000 please annex a brief statement providing the following details:

- (1) Any proposed major capital expenditure (e.g. property)
- (2) A budget setting out annual income and the projected annual costs of care
- (3) Investment proposal in outline if known

4.8 Does the person to whom the application relates have any money held in bank or building society accounts (or similar)?

Yes No

If No, go to Section 4.9

(You must include any money held at the Court Funds Office)

Bank/Building Society (or similar accounts)	Account Number	Type of account	Names on the account	Balance
Total				

Continue on separate sheet if necessary

4.9 Does any other person or organisation (other than those already mentioned) hold money for, or owe money to, the person to whom the application relates?

Yes No

If Yes, please give full details including the name and address of those involved the amount held and the reason for holding the money, or the amount owed and reason for loan.

Investments

4.10 Does the person to whom the application relates own any investments such as stocks and shares, unit trusts, bonds etc?

Yes No

If Yes, please provide an approximate value of the investments held and the name of the fund manager (if applicable)

Total

Land and property

4.11 Does the person to whom the application relates own any land or property?

Yes No

If Yes, please enter details below

If No, go to Section 4.13

Property 1 - address

Market value

Balance of any outstanding mortgage or other legal charge (e.g. equity release)

If the property is not owned solely by the person to whom the application relates please provide the following information:

How is the property held?

Joint tenants

Name and address of the co-owner(s):

Tenants in common

1 Name

Address

2 Name

Address

3 Name

Address

What is the percentage share to which the person to whom the application relates is entitled?

%

Property 2 - address

Market value

Balance of any outstanding mortgage or other legal charge (e.g. equity release)

If the property is not owned solely by the person to whom the application relates please provide the following information:

How is the property held?

Joint tenants

Name and address of the co-owner(s):

Tenants in common

1 Name

Address

2 Name

Address

3 Name

Address

What is the percentage share to which the person to whom the application relates is entitled?

%

If more than 2 properties, please continue on a separate sheet

4.12 Is authority sought to sell the property (properties)?

Yes No

If Yes and there is more than one property, please specify which property is to be sold

1 2 3

If No, please set out proposals for dealing with the property (properties) below:

Important

If a property is held in joint names, the deputy, when appointed, will not have the legal authority to deal with its sale. This also applies when a property is held as tenants in common and the co-owner is deceased. Please refer to guidance notes for further information.

Personal possessions

4.13 Please provide details of any possessions with an approximate overall value in excess of £10,000 (e.g. paintings, antiques, collections)

Total value

Business

4.14 Does the person to whom the application relates own or have any interest in a business? Yes No

If Yes, please provide the following:

- a) the name and nature of the business and its legal status, e.g. partnership, sole trader etc.
- b) the approximate value of the business
- c) the value of the share owned by the person to whom the application relates and their role in the business
- d) a draft of any directions or order sought in relation to the business

Expenditure

4.15 Please provide details of the **annual costs** of care (maintenance)

Where the person to whom the application relates lives in a nursing/care home, are they liable to contribute towards the cost? Yes No

If Yes, what is the **weekly amount**?

Debts and money owed

4.16 Does the person to whom the application relates have any outstanding debts in excess of £1,000? Yes No

If Yes, please give details of any debts of the person to whom the application relates including the name(s) of any creditors and the amount of the debt.

Creditor	Amount
Total	

Section 5 - Visits

Please provide details of who visits the person to whom the application relates and how often.

Section 6 - Other information

Please provide any background or additional information which you think might be relevant, or of assistance to the court, when making its decision, including consideration of section 4(6) of the Mental Capacity Act 2005.

Section 7 - Statement of truth

The statement of truth is to be signed by you, your solicitor or your litigation friend.

*(I believe) (The applicant(s) believe(s)) that the facts stated in this annex are true.

Applicant (1)

Signed

*Applicant('s litigation friend)('s solicitor)

Name

Date

Name of firm

Position or office held

Applicant (2)

Signed

*Applicant('s litigation friend)('s solicitor)

Name

Date

Name of firm

Position or office held

* Please delete the options in brackets that do not apply.

If there are more than 2 applicants, please continue on a separate sheet.

COP1A Notes

Guidance notes on completing form COP1A Annex A: Supporting information for property and financial affairs applications

Please read the following notes before completing Annex A

You must complete and file this annex to form COP1 if your application relates to property and affairs matters. This includes applications to appoint a deputy for property and affairs.

If your application relates to another matter then you may need to complete a different annex. Refer to Section 1 of form COP1 and the notes to form COP1 for information on what forms to complete.

Completing form Annex A

Please ensure that you provide all relevant information to support your application. If you do not have full details of bank/building society accounts and investments you may need to apply to the court for an interim order to obtain these details.

Please continue on a separate sheet of paper if you need more space to answer a question. Write your name, the name and date of birth of the person to whom the application relates, and the number of the question you are answering.

What you need to do next

When you have completed this form, you will need to consider what other forms and documents you need to complete. Refer to the guidance notes on form COP1 for information on what forms to complete and what you need to do next.

When you have completed all the forms you should take, or send them to the Court of Protection, along with any fee. For details on where to send your application check the website:
www.gov.uk/court-of-protection

Disclaimer

Court of Protection staff cannot give legal advice. If you need legal advice please contact a solicitor or your local Citizens Advice Bureau. Information in this guidance is believed to be correct at the time of publication; however we do not accept any liability for any error it may contain.

If you need further help with your application, please check the website www.gov.uk/court-of-protection