

Appointor –

The person who makes an Enduring Guardian appointment is known as the appointor.

The appointor must have capacity in order to revoke the appointment of their Enduring Guardian.

Note: Before the appointor signs here they must arrange for a witness to watch them sign this form. The witness needs to complete their details opposite.

The witness cannot be the Enduring Guardian, or a substitute Enduring Guardian/s.

The witness must be an Australian legal practitioner/ Registrar of the NSW Local Court/overseas-registered foreign lawyer or approved employee of NSW Trustee & Guardian. Only these persons can witness the execution of this revocation.

Revocation of Appointment of Enduring Guardian

For New South Wales

(Guardianship Regulation 2016, Schedule 1)

I, *[your full name]*: _____

Of *[your address]*: _____

Occupation: _____

Phone number: _____

Date of birth: _____

Revoke the appointment of *[insert the name of each Enduring Guardian]*

_____ as my Enduring Guardian/s.

I understand that this revocation will not be effective unless the Enduring Guardian has been given/is given written notice of the revocation.

Date of original instrument of appointment _____
[insert if known]

Signature _____ Date _____

Optional – signature on my behalf

The appointor instructed me to sign this revocation on their behalf.

Signature on behalf of appointor _____

Date _____

Signer's full name _____

Signer's address _____

Signer's phone number _____

Witness certificate

I, *[your full name]*: _____

Of *[your address]*: _____

Phone number: _____

- Occupation: Australian legal practitioner
- Registrar of the NSW Local Court
- Overseas-registered foreign lawyer
- Approved employee of NSW Trustee & Guardian

Certify that *[Tick applicable boxes below, cross out those which do not apply]*

[insert name of appointor revoking appointment]

appeared to understand the effect of this revocation and voluntarily executed the revocation in my presence.

The appointor revoking the appointment voluntarily instructed *[insert signer's full name]*

_____ to sign the revocation on their behalf and that person executed the revocation in my presence.

Signature _____ Date _____