

Lasting Power of Attorney (LPA) Change of Particulars Form

ln	npo	ortant In	forma	atio	n													
1.	go.gov.sg/opgeservices: (A) Name (D) Contact no.				(B) F (E) E	·	s portal using your Singpass at: (C) Address rove the changes.											
2.			be required to upload the relevant documents to prove the changes. Ind not update (C) Address, if you had changed your address on your NRIC at the tion and Checkpoints Authority (ICA) or any Neighbourhood Police Posts/Centres. Individual to update (C) Address, if you had changed your address on your NRIC at the tion and Checkpoints Authority (ICA) or any Neighbourhood Police Posts/Centres. Individual to update (C) Address, if you had changed your address on your NRIC at the tion and Checkpoints Authority (ICA) or any Neighbourhood Police Posts/Centres. Individual to update (C) Address, if you had changed your address on your NRIC at the tion and Checkpoints Authority (ICA) or any Neighbourhood Police Posts/Centres. Individual to update (C) Address, if you had changed your address on your NRIC at the tion and Checkpoints Authority (ICA) or any Neighbourhood Police Posts/Centres.															
3.	Alt i) ii)	ternatively, you can submit this form manually: It should take you approximately 5 minutes to complete this form. If you are updating the particulars for different persons, please use separate forms for each individual.																
	iii)	iii) Please submit this completed form <u>and</u> relevant supporting documents, by email of														post		
		to: Office of th	o Dublic	Guar	dian													
					ırdıan ıuardian.gov.sg													
		Address: 3					v.sy											
		CPF Bishan			#UJ-U													
				,														
Singapore 579838																		
Nan	ne:																	
			.	•			•	•	·		•		,	•				
		IN/Passport																
(*Delete as appropriate)																		
LPA Registration Number:								-										
l an	m the:																	
□ Donor					□ Donee							☐ Replacement Donee						

Lasting Power of Attorney (LPA) Change of Particulars Form

I wish to update my details f	or (nl	่อกรอ	tick	√ the	o rele	vant	hox)								
Change of:		Supporting documents I need to submit:													
(A) Name		hoto	ocop _:	y of o	deed	poll	show	/ing i	ny n	ew n	ame				
(B) Passport no.	□ P	hoto	ocop	y of r	new p	oassp	ort								
(C) Address	□Р	hoto	ocop	y of I	D (e.	g. NF	RIC/F	IN/Pa	asspo	ort) sl	howi	ng n	ew ac	ddres	s
(D) Contact no. ¹															
(E) Email address ¹															
(F) Marriage status (due to divorce or annulment of marriage between donor and donee)	☐ Photocopy of Court Order														
(G) Financial status (due to bankruptcy)	☐ Photocopy of Court Order, Credit Bureau Report														
I am updating the following (please tick √ the relevant box)	detail	s or	beh	alf o	of soi	neoi	ne els	se:							
(H) Party who is reported on is the	☐ Donor ☐ Donee ☐ Replacement Donee														
(I) Financial status (due to bankruptcy)	□Р	☐ Photocopy of Court Order, Credit Bureau Report													
(J) Mental capacity	☐ Photocopy of medical report stating loss of mental capacity														
(K) Vital status	☐ Photocopy of death certificate														
I declare that the information	n prov	vide	d ab	ove i	s tru	e an	d coı	rrect	•						
Signature															
Date signed:															

¹ No supporting documents needed. Please fill in the new contact details accordingly.