Power of attorney
In respect of probate and private administration of estate

Probate case number: _____

I, the undersigned beneficiary

Name: _____

Civil registration no.: _____

Address: _____

Hereby authorize

Name: _____

Address: _____

Phone number: _____

E-mail: _____

to represent me in all matters pertaining to the estate left by

Name: _____

Address: _____

Civil registration no./date of birth: _____

Date of death: _____

and surviving/predeceased spouse

Name: _____

Civil registration no./date of birth: _____

Date of death: _____

with the effect that everything she/he decides or declares on my behalf will have the same legal effect as if decided or declared by me, including (tick off the box No for any item(s) not required to be covered by the power of attorney):

1) signing and approving the inventory of the assets and liabilities of the estate as at the date of death
   No ☐

2) making decisions on the sale, pledging, mortgaging or distribution to the beneficiaries of the assets of the estate
   No ☐

3) arranging for the registration of any title deeds, mortgages, charges or pledges or other documents concerning the assets and liabilities of the estate and issuing a power of attorney for another natural or legal person to cause such registration
   No ☐

4) signing and approving the estate inventory
   No ☐

5) delegating the authority granted hereunder to another person
   No ☐

Place and date: _____

Signature of beneficiary (must be filled out in writing): _____

If the power of attorney is to be used for registration of property, two attesting witnesses must also sign. If the power of attorney is executed outside Denmark, two persons or a Danish diplomatic representation, must also sign as witnesses.

In witness of the genuineness of the signature, the correctness of the date and the legal capacity of the signor:

Name: _____

Civil registration no.: _____

Occupation: _____

Complete address:

Street name: _____

Postal code and town: _____

Date: _____

Signature (must be filled out in writing): _____

Name: _____

Civil registration no.: _____

Occupation: _____

Complete address:

Street name: _____

Postal code and town: _____

Date: _____

Signature (must be filled out in writing): _____

Guidance on registration of property can be found at https://www.domstol.dk/rettenigroenland/en-kelte-sagsomraader/registrering-af-rettigheder.