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How to Complete a Pennsylvania Agent's Acknowledgment

Agent's Acknowledgment of Duties • 20 Pa.C.S. § 5601(d)

INSTRUCTIONS — KEEP FOR YOUR RECORDS. DO NOT ATTACH THIS PAGE TO YOUR DOCUMENT.

About this form. In Pennsylvania, an agent has no authority to act under a power of attorney until the agent signs this acknowledgment and attaches it to the power of attorney. Use this form when an agent or successor agent did not sign one when the power of attorney was made.

1. **Identify the power of attorney**
   Enter the principal's name and the date the power of attorney was signed.
2. **Check your role**
   Agent, successor agent or co-agent.
3. **Read the duties**
   The acknowledgment confirms you will act in good faith and in the principal's best interest.
4. **Sign in front of a notary**
   Banks and title companies often require a notarized acknowledgment. Bring a current photo ID.
5. **Attach it**
   Staple it to the power of attorney (or a copy) and present both together.

Signing requirements: Signed by the agent. Notarization is recommended; many banks and title companies ask for it.

After It's Signed

- Keep the signed acknowledgment attached to the power of attorney.

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Have questions about your Agent's Acknowledgment? To consult with an attorney, contact **Gavrilov & Brooks Law Firm** at **(916) 504-0529** or **www.gavrilovlaw.com**.

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AGENT'S ACKNOWLEDGMENT OF DUTIES

Pennsylvania • 20 Pa.C.S. § 5601(d)

This acknowledgment is attached to and made part of the following power of attorney:

Principal name

Date of power of attorney

I am signing as (check one):

- ☐ Agent
- ☐ Successor agent (serving because the prior agent cannot or will not serve)
- ☐ Co-agent

Agent printed name

Agent address

Phone

I, the person named above, have read the attached power of attorney and am the person identified as the agent for the principal. I hereby acknowledge that when I act as agent:

I shall act in accordance with the principal's reasonable expectations to the extent actually known by me and, otherwise, in the principal's best interest, act in good faith and act only within the scope of authority granted to me by the principal in the power of attorney.

I also understand that, unless the power of attorney provides otherwise, I must act loyally for the principal's benefit, keep my funds separate from the principal's funds, avoid conflicts of interest, and keep a record of all receipts, disbursements and transactions (20 Pa.C.S. § 5601.3).

X _____

Agent signature

Date

ACKNOWLEDGMENT

COMMONWEALTH OF PENNSYLVANIA

COUNTY OF

This record was acknowledged before me on _____ (date) by _____ (name(s) of individual(s)).

X _____

Signature of notarial officer

(Notary seal)

Title of office (e.g., Notary Public)

My commission expires

Commission number

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