

POWER OF ATTORNEY
For Sale of Real Estate
Chicago Title Insurance Company

This Power of Attorney is made on _____, 20____,

BETWEEN

the Principal,

whose address is _____

referred to as the Grantor,

individually referred to as "I" or "my,"

AND

the Agent,

whose address is _____

referred to as "You."

1. **Grant of Authority.** I appoint You to act as my Agent (called an attorney in fact) to do each and every act which I could personally do for the following uses and purposes:
 - a. To execute contracts, deeds, affidavits, survey affidavits, RESPA, IRS 1099 and all forms and documents required in connection with the sale by me of my real property located and described as follows:
 - b. To attend the closing of title and deliver the deed, affidavit of title, survey affidavit, and other closing forms and documents;
 - c. To represent me in all respects at the closing including but not limited to the negotiation, payment and settlement of all adjustments, liens, claims and encumbrances;
 - d. To receive all proceeds from the sale of the property, including any refund of escrow funds or other mortgage payments;
 - e. To forward to me all of the funds received from the sale of the property, after the payment of attorney fees to my attorney;
 - f. To do all acts that T might or could have done in the sale of the property.

2. **Takes Effect Regardless of Disability.** This Power of Attorney is effective now and remains in effect even if I become disabled or incapacitated.
3. **Signatures.** By signing below, I acknowledge that I have received a copy of this Power of Attorney and I understand its terms.

Witnessed By:

_____ (Seal)

_____ (Seal)

STATE OF NEW JERSEY, COUNTY OF _____ SS.

I CERTIFY that on _____, 20 _____,

_____ personally came before me and stated to my satisfaction that this person (or if more than one, each person):

- (a) was the maker of the attached instrument; and,
- (b) executed this instrument as his or her own act.

(Print name and title below signature)

RECORD AND RETURN TO:

NOTARY PUBLIC:

(Print name and title below signature)