CONNECTICUT REAL ESTATE POWER OF ATTORNEY

',	, 01
(Street) in the City of	, State of Connecticut ("Principal")
nereby appoint	, of , State of
(Street) in the City of	, State of
"Agent") to act on my behalf for the pur	pose(s) set forth in Article 1 below.
ARTICLE 1. ASS	SIGNMENT OF AUTHORITY
(<u>Initial</u> and <u>Check</u> the Applicable Type	es):
- SALE of Real Estate: My a	agent is authorized to act on my behalf for the purpose
of selling the lands and premises locat	ted at and
with a legal description of	My
agent is authorized to perform any and	I all acts related to such sale, including, but not limited
to, executing, modifying, and delivering	g any and all documents necessary to complete the
transaction as well as accepting the cle	osing proceeds for deposit into my account which has
been previously disclosed to my agent	· ·
- PURCHASE of Real Estate	e: My agent is authorized to act on my behalf for the
purpose of purchasing the lands and p	premises located at
	and with a legal description of
	My agent is authorized to
perform any and all acts related to suc	h purchase, including, but not limited to the financing
and mortgaging of the property. My ag	ent is authorized to execute, modify and deliver any
documents necessary to complete the	financing and purchase of the property as well as to
withdraw and disburse funds necessar	ry for the closing from my account which I have
previously disclosed to my agent.	
□ - MANAGEMENT of Real E	state: My agent is authorized to act on my behalf for
	s located at
and with a legal description of	
	cts related to maintaining the property, including, but
	nbursement), approving sub-contractors for work,
•	se agreements, evicting tenants and any other
representation as needed for day-to-day	

eSign Page 1 of 4

REFINANCING of Real Estate: My agent is authorized to act on my behalf for
the purpose of refinancing my debts, including, but not limited to, any debts secured by a
mortgage on the lands and premises located atand with a legal description of
My agent is authorized to perform any and all acts related to such refinancing, including but not limited to, modifying, executing and delivering any and all documents necessary to complete the refinancing as well as to withdraw and disburse funds necessary to complete the refinancing from my account which I have previously disclosed to my agent.
ARTICLE 2. DURABLE POWER OF ATTORNEY
This power of attorney shall not be affected by the Principal's subsequent disability or incapacity unless otherwise stated in Article 3(b).
ARTICLE 3. TERM
(<u>Initial</u> and <u>Check</u> the Applicable Term):
a □ - This power of attorney is effective as of the date hereof and shall
terminate upon revocation or automatically on (mm/dd/yyyy).
b. □ - This power of attorney is effective as of the date hereof and shall terminate upon my death or revocation.
c □ - (Non-Durable Option) This power of attorney is effective as of the date hereof and shall terminate upon my incapacity, or death, or revocation.

ARTICLE 4. RATIFICATION

I, the Principal, grant my Agent full power and authority to perform all acts on my behalf as I could do if personally present, now ratifying and confirming all that my Agent may do pursuant to this power.

ARTICLE 5. GOVERNING LAW

This Note shall be governed by, and construed in accordance with, the laws of the State of Connecticut.

eSign Page 2 of 4

ARTICLE 6. REVOCATION

I, the Principal, hereby revoke any existing powers of attorney that may have previously been granted by me relative to the above described property.

In witness whereof, I have executed this instrument on	(mm/dd/yyyy).
Principal's Signature:	
Print Name:	
AFFIRMATION BY WITN	ESS 1
I,, witnessed the execution Principal, and I affirm that the Principal appeared to me to be	
duress, and the Principal affirmed to me that he/she was awa	re of the nature of this Power of
Attorney and signed it freely and voluntarily.	
Witness 1 Signature:	
Print Name:	
AFFIRMATION BY WITN	ESS 2
I,, witnessed the execution	on of this Power of Attorney by the
Principal, and I affirm that the Principal appeared to me to be	
duress, and the Principal affirmed to me that he/she was awa	re of the nature of this Power of
Attorney and signed it freely and voluntarily.	
Witness 2 Signature:	
Print Namo:	

eSign Page 3 of 4

ACCEPTANCE BY AGENT

The undersigned Agent acknowledges and executes this Power of Attorney, and by such execution does hereby affirm that I: (A) accept the appointment as agent; (B) understand the duties under the Power of Attorney and under the law.

Agent's Signature:	
Print Name:	
ľ	NOTARY ACKNOWLEDGMENT
STATE OF	
COUNTY OF	, , SS.
as the Principal who proved above-named person, in my	dd/yyyy), before me appeared I to me through government issued photo identification to be the presence executed foregoing instrument and acknowledged that as his/her free act and deed.
Notary Public	
Print Name:	My commission expires:

eSign Page 4 of 4