MARYLAND REAL ESTATE POWER OF ATTORNEY

I,	, Of		(Street)
n the City of	, 5	State of Maryland ("	Principal") hereby appoint
	, of		(Street) in the
			("Agent") to act on my
pehalf for the purpose(s)	set forth in Article 1 belo	OW.	
ARTI	CLE 1. ASSIGNM	ENT OF AUTH	ORITY
(Initial and Check the	Applicable Types):		
□ - SALE of Re	al Estate: My agent is a	uthorized to act on	my behalf for the purpose
of selling the lands and	premises located at		and
			My
agent is authorized to p	erform any and all acts re	elated to such sale,	including, but not limited
to, executing, modifying	, and delivering any and	all documents nece	essary to complete the
transaction as well as a	ccepting the closing prod	ceeds for deposit in	to my account which has
been previously disclos	ed to my agent.		
🗆 - PURCHASE	of Real Estate: My age	ent is authorized to a	act on my behalf for the
purpose of purchasing t	he lands and premises le	ocated at	·
	and	d with a legal descri	ption of
perform any and all acts	s related to such purchas	se, including, but no	t limited to the financing
and mortgaging of the p	property. My agent is autl	horized to execute,	modify and deliver any
documents necessary t	o complete the financing	and purchase of th	e property as well as to
withdraw and disburse	funds necessary for the o	closing from my acc	ount which I have
previously disclosed to	my agent.		
🗆 - MANAGEM	ENT of Real Estate: My	agent is authorized	to act on my behalf for
the purpose of managin	g the premises located a	at	
and with a legal descrip	tion of		·
My agent is authorized	to perform all acts related	d to maintaining the	property, including, but
not limited to: making re	pairs (with reimburseme	ent), approving sub-	contractors for work,
negotiating rents, signir	g lease/sublease agreer	ments, evicting tena	nts and any other
representation as need	ed for day-to-day manag	ement.	

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 at
and 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
Litha Dringing arout my Agent full newer and authority to perform all acts on my habalf as I

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 Maryland.

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	are 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:	
NO	OTARY ACKNOWLEDGMENT
STATE OF	
COUNTY OF	, SS.
as the Principal who proved to	/yyyy), before me appeared o me through government issued photo identification to be the presence executed foregoing instrument and acknowledged that his/her free act and deed.
Notary Public	
Print Name	My commission expires:

eSign Page 4 of 4