## **NORTH CAROLINA REAL ESTATE POWER OF ATTORNEY**

l,	, Of
	, State of North Carolina ("Principal")
	, of
Street) in the City of	, State of
"Agent") to act on my behalf for the pu	rpose(s) set forth in Article 1 below.
ARTICLE 1. AS	SIGNMENT OF AUTHORITY
( <u>Initial</u> and <u>Check</u> the Applicable Typ	es):
-	agent is authorized to act on my behalf for the purpose
	ited atand
with a legal description of	My d all acts related to such sale, including, but not limited
transaction as well as accepting the cobeen previously disclosed to my agen  ———————————————————————————————————	te: My agent is authorized to act on my behalf for the premises located at
	and with a legal description of
perform any and all acts related to such and mortgaging of the property. My accomments necessary to complete the	. My agent is authorized to ch purchase, including, but not limited to the financing gent is authorized to execute, modify and deliver any e financing and purchase of the property as well as to ary for the closing from my account which I have
	Estate: My agent is authorized to act on my behalf for
	s located at
•	
	acts related to maintaining the property, including, but
<b>9</b> .	mbursement), approving sub-contractors for work,
	ase agreements, evicting tenants and any other
representation as needed for day-to-d	ay management.

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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):	
<b>a.</b> □ - This power of attorney is effective as of the date hereof and shall terminate upon revocation or automatically on (mm/dd/yyyy).	
<b>b.</b> □ - This power of attorney is effective as of the date hereof and shall terminate upon my death or revocation.	
<b>c.</b> □ - ( <b>Non-Durable Option</b> ) 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 North Carolina.

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## **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: **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: \_\_\_\_\_ NOTARY ACKNOWLEDGMENT STATE OF \_\_\_\_\_ COUNTY OF , ss. On (mm/dd/yyyy), before me appeared as the Principal who proved to me through government issued photo identification to be the above-named person, in my presence executed foregoing instrument and acknowledged that she/he executed the same as his/her free act and deed. **Notary Public** Print Name: \_\_\_\_\_ My commission expires: \_\_\_\_\_

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