

Prepared by, recording requested by and return to:

Name:  
Company:  
Address:  
City:  
State:                      Zip:  
Phone:  
Fax:

-----Above this Line for Official Use Only-----

**SPECIAL POWER OF ATTORNEY  
FOR CLOSING REAL ESTATE TRANSACTION**

(Agent for Seller)

STATE OF DELAWARE  
COUNTY OF \_\_\_\_\_

KNOW ALL MEN BY THESE PRESENT, THAT I \_\_\_\_\_,  
whose address is \_\_\_\_\_, \_\_\_\_\_ (City),  
\_\_\_\_\_ (State), \_\_\_\_\_ (Zip), desiring to execute a SPECIAL POWER  
OF ATTORNEY, hereby appoint, \_\_\_\_\_, of  
\_\_\_\_\_ County, Delaware, as my Attorney-in-Fact to act as follows,  
GRANTING unto my Attorney-in-Fact full power to:

To do all things necessary to close on the sale of the property described below,  
commonly known as

\_\_\_\_\_ (address), with full power  
and authority for me and in my name to execute any and all documents necessary  
to effect the sale, conveyance and settlement on said property to any person or  
persons of his choosing, including but not limited to, deeds, checks, receipts,  
releases, warranties, affidavits, contracts, addenda, settlement statements, loan  
commitments and disclosure statements, truth-in-lending statements, all forms of  
commercial papers, endorsements to checks, or the like, and any such other  
instrument or instruments in writing of whatever kind, character and nature as  
may be necessary to complete the sale, financing arrangements, and the settlement  
process. FURTHER GRANTING full power and authority to collect and receive  
any funds or proceeds of said sale in any manner which, in his sole discretion, he  
sees fit.

The legal description of the property is as follows, to-wit:

[INSERT DESCRIPTION OR ATTACH EXHIBIT]

I hereby ratify and confirm all that said attorney-in-fact shall lawfully do or cause to be done by virtue of this Power of Attorney and the rights and powers herein granted.

All acts done by means of this power shall be done in my name, and all instruments and documents executed by my Attorney hereunder shall contain my name, followed by that of my attorney and the description "Attorney-in-Fact", excepting however any situation where local practice differs from the procedure set forth herein, in that event local practice may be followed. This SPECIAL POWER OF ATTORNEY shall be valid and may be relied upon by any third parties until such time as any revocation is recorded in the recorder's office of the county where the land is located.

DATED this the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
Signature  
Print Name: \_\_\_\_\_

State of Delaware  
County of \_\_\_\_\_

\_\_\_\_\_ (date)

\_\_\_\_\_ (name(s) of  
person(s)).

This instrument was acknowledged before me on \_\_\_\_\_  
by \_\_\_\_\_.

\_\_\_\_\_  
Notary Public  
Print Name: \_\_\_\_\_

(Seal, if any)  
My commission expires:  
\_\_\_\_\_

Principal Name and Address	Attorney-in-Fact Name and Address
Name:	Name:
Address:	Address:
City:	City:
State:                      Zip:	State:                      Zip:
Phone:	Phone: