

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 Purchaser)

STATE OF VERMONT
COUNTY OF _____

KNOW ALL MEN BY THESE PRESENT, THAT I _____,
whose address is _____,
(City), _____ (State), _____ (Zip), and currently
residing in _____, County, _____, desiring to execute a
SPECIAL POWER OF ATTORNEY, hereby appoint, _____, of
_____ County, Vermont, 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 purchase of the property described below, commonly known as _____ (address), with full power and authority for me and in my name to sign, seal, execute, acknowledge, and deliver and accept any and all documents necessary to effect the purchase and settlement on said property from the owner thereof, including but not limited to, sales contracts and addendum thereto, negotiable instruments, deeds, deeds of trust, or other instruments, disclosure statements, closing or settlement statements, etc. FURTHER GRANTING full power and authority to pay any funds for the purchase and the execution of any and all documents in connection therewith, including, but not limited to notes, deeds of trust or mortgages.

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.

Signed this _____ day of _____, 20_____

Principal

City, County, and State of Residence

I, _____, witnessed the signature of the principal above and I affirm that the principal appeared to be of sound mind and free from duress at the time this power of attorney was signed and the principal affirmed to me that he or she was aware of the nature of the document and signed it freely and voluntarily.

Witness:

Address:

Witness:

Address:

STATE OF VERMONT

COUNTY OF _____

At _____ (town or city) on _____ (date)
_____ personally appeared and acknowledged the foregoing power of attorney to be his/her free act and deed. Before me-

(Signature of Person Taking Acknowledgment)

(Seal)

(Title)

My commission expires: _____

I, _____, agent named above attest that : (1) I accept appointment as agent; (2) I understand the duties I am assuming under this power of attorney under the law; (3) I understand that I have a duty to act if expressly required to do so in this power of attorney consistent with said 14 VSA Section 3506(c); and (4) I understand that I am expected to use my special skills or expertise on behalf of the principal as follows (insert any such special skills):

Date _____

Agent

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

Witness Name and Address	Witness Name and Address
Name: _____	Name: _____
Address: _____	Address: _____
City: _____	City: _____
State: _____ Zip: _____	State: _____ Zip: _____
Phone: _____	Phone: _____