

UNOFFICIAL COPY



Saturn Title LLC
0700425

Doc#: 0736110013 Fee: \$30.00
Eugene "Gene" Moore RHSP Fee: \$10.00
Cook County Recorder of Deeds
Date: 12/27/2007 10:04 AM Pg: 1 of 4

Property of Cook County Clerk's Office

POWER OF ATTORNEY

PIN # 18-36-203-025-0000

Property Address: 8040 S. Thomas Ave Bridgeview, IL 60455

Prepared by and Mail to

Mohsin Yafai
8040 South Thomas Ave
Bridgeview, IL 60455

0700425 1/2
SATURN TITLE LLC

*Saturn Title LLC
7243 W. Touhy Ave
Chicago, IL 60631*

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and _____ has _____ an _____ address _____ of _____
 _____ 8040 S. THOMAS AVENUE, BRIDGEVIEW, IL, 60455 _____

2. AGENT'S AUTHORITY

(YOU MUST CROSS OUT ALL POWERS YOU WISH TO WITHHOLD FROM YOUR AGENT)

I hereby authorize my Agent to do all acts necessary to obtain financing and pledge the Property as security on my behalf for the following purposes:

- Purchase the Property
- Refinance to pay off existing liens on the Property
- Construct a new dwelling on the Property
- Improve, alter or repair the Property
- Withdraw cash equity from the Property
- Establish a line of credit with the equity in the Property

3. SPECIAL INSTRUCTIONS

VA Loan: In the event my Agent applies for a loan on my behalf that is guaranteed by the Department of Veterans Affairs: (1) all or a portion of my entitlement may be used; (2) if this is a purchase transaction, the price of the Property is \$ _____; (3) the amount of the loan to be secured by the Property is \$ _____; and (4) I intend to use and occupy the Property as my home. My Agent is authorized to sign the loan application, receive federal, state- and investor-required disclosures, and sign all documents necessary to consummate the loan on my behalf.

FHA Loan: I intend to use and occupy the Property as my home. My Agent is authorized to sign the loan application (only if I am incapacitated), receive federal-, state- and investor-required disclosures, and sign all documents necessary to consummate the loan on my behalf.

Conventional Loan: My Agent is authorized to sign the loan application, receive federal-, state- and investor-required disclosures, and sign all documents necessary to consummate the loan on my behalf.

4. GENERAL PROVISIONS

THIS POWER OF ATTORNEY IS EFFECTIVE IMMEDIATELY AND WILL CONTINUE UNTIL IT IS REVOKED BY ME. Any third party who receives a copy of this Power of Attorney may act under it. Revocation of this Power of Attorney is not effective as to a third party until the third party receives actual notice of the revocation. I agree to indemnify the third party for any claims that arise against the third party due to reliance on this Power of Attorney.

THIS POWER OF ATTORNEY IS NOT AFFECTED BY MY SUBSEQUENT DISABILITY OR INCAPACITY.

I HEREBY RATIFY AND CONFIRM ALL THAT MY AGENT MAY LAWFULLY DO OR CAUSE TO BE DONE BY VIRTUE OF THIS POWER OF ATTORNEY AND THE RIGHTS, POWERS AND AUTHORITY GRANTED HEREIN.

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Hatem Elhas
Witness HATEM ELHAS Date _____

[Signature]
Principal MOHSIN_YAFAI Date _____

Witness _____ Date _____

ATTENTION NOTARY PUBLIC: If the acknowledgment below does not meet the statutory requirements of your authorizing state, complete a proper acknowledgment on a separate sheet of paper and attach it to this document.

STATE OF IL
COUNTY OF Cook

Before me, on this day personally appeared _____
MOHSIN_YAFAI, known to me (or proved to me
on the oath of DRIVERS LICENSE or
through _____) to be the person whose name is
subscribed to the foregoing instrument and acknowledged to me that s/he executed the same for the purposes and
consideration therein expressed.



[Signature]
Notary Public

WARNING TO AGENT: THE AGENT AND ATTORNEY-IN-FACT, BY ACCEPTING OR ACTING UNDER THE APPOINTMENT, ASSUMES THE FIDUCIARY AND OTHER LEGAL RESPONSIBILITIES OF AN AGENT.

DATE December 14, 2007