

UNOFFICIAL COPY

Chicago Title Insurance Company



Doc#: 1011712076 Fee: \$70.00
Eugene "Gene" Moore RHSP Fee: \$10.00
Cook County Recorder of Deeds
Date: 04/27/2010 01:08 PM Pg: 1 of 5

I certify that this is a true, correct and accurate copy of

The original instrument

By: *[Handwritten Signature]*

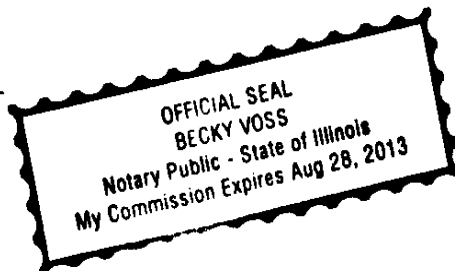
State of Illinois, Cook County SS:

I, the undersigned a notary public in and for said county and state do hereby certify that _____ personally known to be the same person whose name subscribed to the foregoing instrument, appeared before me this day in person and acknowledged that Lisa R. McFadden signed and delivered the said instrument as her free and voluntary act for the uses and purposes therein set forth.

Given under my hand and official seal this 20 day of April, 2010

Notary Public

[Handwritten Signature]



BOX 984 339 671

503

231033-PA-10/2 REC

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231633 PIC 1 of 1 RE1

Property of Cook County Clerk's Office

After recording return to: _____ Prepared by: _____
(Space Above This Line For Recording Data)

SPECIFIC DURABLE POWER OF ATTORNEY

NOTICE: IF YOU HAVE ANY QUESTIONS ABOUT THE POWERS YOU ARE GRANTING TO YOUR AGENT AND ATTORNEY-IN-FACT IN THIS DOCUMENT, OBTAIN COMPETENT LEGAL ADVICE. THIS DOCUMENT DOES NOT AUTHORIZE ANYONE TO MAKE MEDICAL AND OTHER HEALTH-CARE DECISIONS FOR YOU. YOU MAY REVOKE THIS POWER OF ATTORNEY IF YOU LATER WISH TO DO SO.

I, VINATHA CHAKRAVARTHI
whose address is 1570 W ETHANS GLEN DR, PALATINE, IL-60067
appoint PRABHU SRINIVASAN
whose address is 1570 W ETHANS GLEN DR, PALATINE, IL-60067
as my agent and attorney-in-fact ("Agent") to act for me in any lawful way with respect to applying for and consummating financial transactions involving the Property (described below).

1. PROPERTY

The Property is described as: see attached

and has an address of 1570 W ETHANS GLEN DR, PALATINE, IL-60067

THE SIGNATURES OF THE PARTIES EXECUTING THIS DOCUMENT ARE COPIES AND ARE NOT ORIGINAL SIGNATURES.

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CHICAGO TITLE INSURANCE COMPANY
COMMITMENT FOR TITLE INSURANCE
SCHEDULE A (CONTINUED)

ORDER NO.: 1580 000231633 01580

5. THE LAND REFERRED TO IN THIS COMMITMENT IS DESCRIBED AS FOLLOWS:

LOT 24 IN ETHANS GLEN EAST, A SUBDIVISION OF PART OF THE SOUTHEAST 1/4 OF SECTION 8 AND THE SOUTHWEST 1/4 OF SECTION 9, TOWNSHIP 42 NORTH, RANGE 10, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

02-69 320-008-0000
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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~~
- ~~Ratification 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.

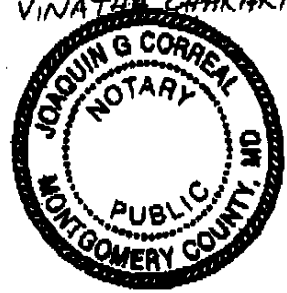
I HEREBY RATIFY AND CONFIRM ALL THAT MY AGENT MAY LAWFULLY DO OR CAUSE TO BE DONE BY VIRTUE OF THIS POWER OF ATTORNEY AND THE RIGHTS, POWERS AND AUTHORITY GRANTED HEREIN.

[Signature] 11-5-09
 Witness Attyeled Date

JOAQUIN G CORREAL 11-5-09
 Witness JOAQUIN CORREAL Date

Vinatha 11/05/2009
 Principal VINATHA CHARARAVARTHI Date

Specific Durable Power of Attorney
1U015-XX (07/05) gsg



Notary Public
 Montgomery Co., State of Maryland
 Joaquin G. Correal
 My Appointment Expires 10 / 24 / 2010

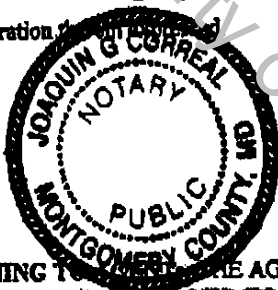
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ATTENTION NOTARY PUBLIC: If the acknowledgment below does not meet the statutory requirements of your authorizing state, complete a proper acknowledgment on a separate sheet of paper and attach it to this document.

STATE OF Maryland

COUNTY OF Montgomery

Before me, on this day personally appeared Veronica Chakravasthi known to me (or proved to me on the oath of Driver License: C:261-8607-22841 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 of _____



Joaquin G. Correal
Notary Public, Montgomery County, State of Maryland
Joaquin G. Correal
My Appointment Expires 10 / 24 / 2010

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

PROPERTY OF COOK COUNTY CLERK'S OFFICE