

UNOFFICIAL COPY

BE IT KNOWN, that I, MEGHANN M REPLIN, STEVE M REPLIN AKA STEVEN M REPLIN

Whose residence address is: 32 N BRAINARD AVE
LA GRANGE, IL 60525

As principal, make and appoint the following persons who are employees of ServiceLink, namely: Ahmad Shurdim, Ashley Chattaway, Cecilia Navarro, Nadim Jaradi, Rafael Avila, Thanh Nguyen, whose addresses are C/O ServiceLink, at 3220 El Camino Real, IRVINE, CA 92602. Each of my agents may exercise the powers conferred in this power of attorney separately, without the consent of the other agent. My agents may delegate the powers, tasks and duties to one of the other agents but to no other person. My Agents/AIFs may exercise the powers to accomplish the following specific and limited purposes as permitted by applicable law:

Principal's Witnesses'
Initials Initials

ME GR ASJ

(A) Refinancing and/or home equity financing of the Real Estate located at 32 N BRAINARD AVE, LA GRANGE, IL 60525 (19278175).

ME GR ASJ

(B) To borrow, sign, pledge, mortgage, finance, and refinance the Property located at: 32 N BRAINARD AVE, LA GRANGE, IL 60525 to effectuate the above referenced refinancing and banking transactions with Wells Fargo Bank, NA (hereinafter called "Lender") with a loan amount currently estimated to be \$40,000.00, but in any event not to exceed \$46,000.00. See attached Exhibit A for full legal description.

ME GR ASJ

(C) To execute, acknowledge receipt of, approve, and deliver all documents including but not limited to:

- a. Notes, Mortgages/Deeds of Trust, Subordinations, security instruments, riders, attachments and addenda, including any documents necessary or requested as part of this transaction by the title insurer, lender or other parties to the transaction;
- b. those documents needed by governmental and taxing authorities as part of this transaction;
- c. lien waivers, subordination/waiver of homestead and any marital rights necessary as part of this transaction; and
- d. escrow instructions, closing or settlement statements, truth in lending disclosures (including notice of my right to rescind the credit extension, if applicable), loan applications, HUD-1 and other written instruments instruments required or requested as part of this transaction.

Further giving and granting said Agent/AIF, full power and authority to do and perform all and every act and thing whatsoever necessary to be done in and about the specific and limited premises (set out herein) as fully, to all intents and purposes, as might or could be done if personally present, with full power of substitution and revocation, hereby ratifying and confirming all that said attorney in fact (also called agent) should lawfully do or cause to be done by virtue hereof. Said Agent/AIF shall only execute documents if I have, to the satisfaction of the Agent/AIF in a recorded, interactive session conducted via the Internet, both confirmed my identity and reaffirmed, after an opportunity to review the required loan documents, my agreement to the terms and conditions of the required loan documents evidencing said refinancing transaction and agreed to the execution of said required loan documents by the Agent/AIF.

This Power of Attorney is effective immediately and is limited to the specific transaction described above. This Power of Attorney shall not be effective in the event of my disability or incapacity. I may revoke this Power of Attorney at any time by providing written notice to my Agent/AIF at Closing Stream Department C/O ServiceLink, 3220 El Camino Real IRVINE, CA 92602. This Power of Attorney will terminate upon the proper recording of all documents necessary or requested as part of this transaction by the title insurer, lender or other parties to the transaction.

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Conflict of Interest Disclosure. My Agent/AIF can enter into transactions with me or on my behalf in which my Agent/AIF is personally interested as long as the terms of the transaction are fair to me and I have agreed to such an action. I also understand that ServiceLink receives fees for escrow and title services from the closing. I further understand that these fees will be detailed on my Settlement Statement that accompanies my loan documents.

Governing Law. This Power of Attorney shall be construed and governed in accordance with the laws of the state where the subject property is located without reference to the conflicts of laws principles thereof.

I understand that this Power of Attorney is not an approval of my loan application request or a commitment by Lender to make a mortgage loan. Should my loan application request not be approved by Lender, this Power of Attorney will be null and void.

I ACKNOWLEDGE THAT THIS LIMITED POWER OF ATTORNEY DOES NOT AUTHORIZE SAID ATTORNEY-IN-FACT TO EXERCISE ANY RIGHT OF RESCISSION GRANTED BY OR SET FORTH IN THE CLOSING DOCUMENTS IN CONNECTION WITH THIS MORTGAGE TRANSACTION

TO INDUCE ANY THIRD PARTY TO ACT, I AGREE THAT ANY THIRD PARTY RECEIVING AN EXECUTED COPY OR FACSIMILE OF THIS INSTRUMENT MAY ACT ON THIS INSTRUMENT. ANY REVOCATION OR TERMINATION OF THIS INSTRUMENT WILL BE INEFFECTIVE AS TO SUCH THIRD PARTY UNTIL SUCH THIRD PARTY HAS ACTUAL OR CONSTRUCTIVE NOTICE OF SUCH REVOCATION OR TERMINATION. I, FOR MYSELF AND FOR MY HEIRS, EXECUTORS, LEGAL REPRESENTATIVES AND ASSIGNS, AGREE TO INDEMNIFY AND HOLD HARMLESS ANY SUCH THIRD PARTY FROM AND AGAINST ANY AND ALL CLAIMS THAT MAY ARISE AGAINST SUCH THIRD PARTY BY REASON OF SUCH THIRD PARTY HAVING REASONABLY RELIED ON THE PROVISIONS OF THIS INSTRUMENT.

ACKNOWLEDGEMENT BY PRINCIPAL

I, MEGHANN M REPLIN, STEVE M REPLIN AKA STEVEN M REPLIN, the principal(s), sign my name to this power of attorney this 20 day of February, 2015, and, being first duly sworn, do declare to the undersigned authority that I sign and execute this instrument as my power of attorney for a refinance and that I sign it willingly, or willingly direct another to sign for me, that I execute it as my free and voluntary act for the purposes expressed in the power of attorney and that I am eighteen years of age or older, of sound mind and under no constraint or undue influence.

Dated: February 20, 2015

Meghann Replin
MEGHANN M REPLIN

Dated: February 20, 2015

Steve M Replin / Steven M Replin
STEVE M REPLIN AKA STEVEN M REPLIN

Dated: _____, 20____

Dated: _____, 20____

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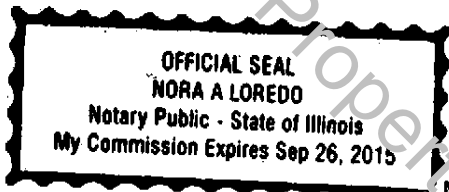
State of IL

County of Lake

Subscribed, sworn to and/or acknowledged before me by Nora A Loreda, the principal this 20 day of FEBRUARY 2015 and proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signatures(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

Evidence of identification was license. I certify under PENALTY OF PERJURY under the laws of the state where the property is located that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.



Nora A Loreda
SIGNATURE OF NOTARY

My Commission Expires: 9/26/2015

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ACKNOWLEDGMENT BY WITNESSES

We, Judy Yost, John Clune, the witnesses, sign our names to the foregoing Power of Attorney being first duly sworn and do declare to the undersigned authority that the principal who is personally known to me, declared to me that this instrument is his/her power of attorney granting to the named agents/attorneys-in-fact the power and authority specified herein, and that he/she was free from duress at the time this Power of Attorney was signed, and that the principal affirmed that he or she was aware of the nature of the document and signs and executes it freely, voluntarily and willingly, or willingly directs another to sign for him/her as his/her power of attorney and that I/we, in the presence and hearing of the principal, sign this Power of Attorney as witness to the principal's signing and that to the best of my knowledge the principal is eighteen years of age or older, of sound mind and under no constraint or undue influence. Each undersigned witness individually certifies that he/she is not: (a) the attending physician or mental health service provider or a relative of the physician or provider; (b) an owner, operator, or relative of an owner or operator of a health care facility in which the principal is a patient or resident; (c) a parent, sibling, descendant, or any spouse of such parent, sibling, or descendant of either the principal or any agent or successor agent under the foregoing power of attorney, whether such relationship is by blood, marriage, or adoption; (d) an agent or successor agent under the foregoing power of attorney or (e) the notary for this transaction. I am eighteen years of age or older and am not disabled.

Witness: Judy Yost Witness: John Clune
 Printed Name: Judy Yost Printed Name: JOHN E. CLUNE

State of Illinois
 County of Lake

SS:

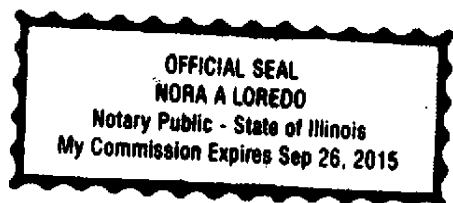
On the 20 day of Feb in the year 2015 before me, the undersigned, personally appeared Judy Yost and John Clune, witnesses, proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

Evidence of identification was Licenses

WITNESS my hand and official seal in the county and state aforesaid this 20 day of Feb, 2015. I certify under PENALTY OF PERJURY under the laws of the state where the property is located that the foregoing paragraph is true and correct.

Nora Loredo
 SIGNATURE OF NOTARY

My Commission Expires: 9/26/2015



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NOTICE TO EACH AGENT/AIF

When you accept the authority granted under this Power of Attorney a special legal relationship, known as agency, is created between you and the principal. Agency imposes upon you duties that continue until you resign or the Power of Attorney is terminated or revoked. As agent/attorney-in-fact you must:

- (1) do what you know the principal reasonably expects you to do with the principal's property;
- (2) act in good faith for the best interest of the principal, using due care, competence, and diligence;
- (3) keep a complete and detailed record of all receipts, disbursements, and significant actions conducted for the principal;

As agent/attorney-in-fact you must not do any of the following:

- (1) act so as to create a conflict of interest that is inconsistent with the other principles in this Notice to Agent;
- (2) do any act beyond the authority granted in this power of attorney;
- (3) commingle the principal's funds with your funds;
- (4) borrow funds or other property from the principal, unless otherwise authorized;
- (5) continue acting on behalf of the principal if you learn of any event that terminates this Power of Attorney or your authority under this Power of Attorney, such as the death of the principal.

If you have special skills or expertise, you must use those special skills and expertise when acting for the principal. You must disclose your identity as an agent/attorney-in-fact whenever you act for the principal by writing or printing the name of the principal and signing your own name "as Agent/AIF" in the following manner:

"(Principal's Name) by (Your Name) as Agent/Attorney-in-Fact"

The meaning of the powers granted to you is contained in Section 3-4 of the Illinois Power of Attorney Act, which is incorporated by reference into the body of the Power of Attorney for property document.

If you violate your duties as agent/attorney-in-fact or act outside the authority granted to you, you may be liable for any damages, including attorney's fees and costs, caused by your violation.

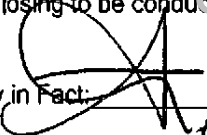
If there is anything about this document or your duties that you do not understand, you should seek legal advice from an attorney.

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ACKNOWLEDGMENT BY AGENTS/ATTORNEYS IN FACT

I, we, Ashley Chattaway, and _____, have read the attached Power of Attorney and are the persons identified as the Agents/AIFs for the Principal. We hereby acknowledge that when we act as Agents/AIFs, we are given power under this Power of Attorney to make decisions about refinancing the Property belonging to the Principal, on the Principal's behalf, in accordance with the terms of this Power of Attorney. This Power of Attorney is valid only if the Principal is of sound mind when the Principal signs it. When acting in the capacity of Agent, we are under a duty (called a "fiduciary duty") to conduct my powers with which I am entrusted with scrupulous honesty, skill, and diligence. If the exercise of our acts is called into question, the burden will be upon each of us to prove that we acted under the standards of a fiduciary. As the Agents, we are not entitled to use the money or property for our own benefit or to make gifts to ourselves or others. As the Agents, our authority under this Power of Attorney will end upon revocation or when the Principal dies or otherwise becomes incompetent and we will not have authority to manage or dispose of any property or administer the estate. If we violate our fiduciary duty under this Power of Attorney, we may be liable for damages and may be subject to criminal prosecution. If there is anything about this Power of Attorney, or our duties under it, that we do not understand, we understand that we should seek legal advice.

- Each of us hereby individually acknowledges that in the absence of a specific provision to the contrary in the power of attorney or in state law, when we act as an agent:
- We shall exercise the powers for the benefit of the principal.
- We shall keep the assets of the principal separate from our assets.
- We shall exercise the powers with scrupulous honesty, skill, and diligence.
- We shall keep a full and accurate record of all actions, receipts and disbursements on behalf of the principal.
- We will follow any instructions of the principal provided to us prior to or at the time of the loan closing to be conducted on the internet.
- We will follow any closing instructions provided by ServiceLink, the title insurer, lender, or other parties to the transaction related to the loan closing to be conducted on the internet

Specimen signature of Agent/Attorney in Fact:  Ashley Chattaway

Specimen signature of Agent/Attorney in Fact: _____

Specimen signature of Agent/Attorney in Fact: _____

County Clerk's Office

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State of California

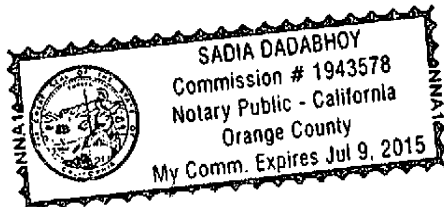
County of Orange

SS:

On this, the 6th day of March, 2015, before me, the undersigned, personally appeared Helen Oshawa and _____ Agents/Attorneys in Fact, who proved to me on the basis of satisfactory evidence (Evidence of identification was CA Drivers License) to be the individual(s) whose name is (are) subscribed to the within Power of Attorney in their respective capacities, and all of said persons being by me duly sworn, the Agent/Attorney in Fact declared to me that they were (each) eighteen (18) years of age or over, and that they are not (neither of them is) related to the principal by blood or marriage, are employees of ServiceLink and that such individual made their acknowledgment and such appearance before the undersigned in the city/township of Irvine, County of Orange, State/Commonwealth of California.

Notary Public _____

My Commission Expires: 07/09/2015



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EXHIBIT A

THE FOLLOWING DESCRIBED REAL ESTATE SITUATED IN THE COUNTY OF COOK, STATE OF ILLINOIS, TO WIT:

LOT 1 IN GUTEKUNST RESUBDIVISION OF LOT 1 OF THE PLAT OF CONSOLIDATION OF LOTS 165 AND 166 IN WEST END ADDITION TO LAGRANGE, BEING A SUBDIVISION OF THAT PART OF THE EAST 1/2 OF THE NORTH EAST 1/4 SECTION 5, TOWNSHIP 38 NORTH, RANGE 12, EAST OF THIRD PRINCIPAL MERIDIAN, LYING BETWEEN THE CENTER LINE OF OGDEN AVENUE AND NORTHERLY LINE OF RIGHT OF WAY OF CHICAGO, BURLINGTON AND QUINCY RAILROAD, IN COOK COUNTY, ILLINOIS.

SUBJECT TO RESTRICTIONS, RESERVATIONS, EASEMENTS, COVENANTS, OIL, GAS OR MINERAL RIGHTS OF RECORD, IF ANY.

ASSESSORS PARCEL NUMBER: 15-05-219-013-0000

ATI ORDER NUMBER: 201501211078

Property of Cook County Clerk's Office