iDoc# 1730304005 Fee \$84.00

"NOTICE TO THE INDIVIDUAL SIGNING THE ILLINOIS STATUTORY SHORT FORM POWER OF ATTORNEY FOR PROPERTY.

PLEASE READ THIS NOTICE CAREFULLY. The form that you will be signing is a legal document. It is governed by the Illinois Power of Attorney Act. If there is anything about this form that you do not understand, you should ask a lawyer to explain it to you.

The purpose of this Power of Attorney is to give your designated "agent" broad powers to handle your financial affairs, which may include the power to pledge, sell, or dispose of any of your real or personal property, even without your consent or any advance notice to you. When using the Statutory Short Form, you may name successor agents, but you may not name co-agents.

This form does not impose a duty upon your agent to handle your financial affairs, so it is important that you select an agent who will agree to do this for you It is also important to select an agent whom you trust, since you are giving that agent control over your financial assets and property. Any agent who does act for you has a duty to act in good faith for your benefit and to use fue care, competence, and diligence. He or she must also act in accordance with the law and with the directions in this form. Your agent must keep a record of all receipts, disbursements, and significant actions taken as your agent.

Unless you specifically limit the period of time that this Power of Attorney will be in effect, your agent may exercise the powers given to him or her throughout your lifetime, both before and after you become incapacitated. A court, however, can take away the powers of your agent if it finds that the agent is not acting properly. You may also revoke this Power of Attorney if you wish.

This Power of Attorney does not authorize your agent to appear in court for you as an attorney-at-law or otherwise to engage in the practice of law unless he or she is a licensed attorney who is authorized to practice law in

The powers you give your agent are explained more fully in Section 3-4 of the Illinois Power of Attorney Act. This form is a part of that law. The "NOTE" paragraphs throughout this form are instructions.

You are not required to sign this Power of Attornay, but it will not take effect without your signature. You should not sign this Power of Attorney if you do not understand everything in it, and what your agent will be able to do if you do sign it.

Please place your initials on the following line indicating that you have. read this Notice:

(d) The Illinois Statutory Short Form Power of Attorney for Property shall be substantially as follows:

> "ILLINOIS STATUTORY SHORT FORM POWER OF ATTORNEY FOR PROPERTY

1. I, SHAHID SAEED SIDDIQUI, 422 VINE COURT, WILMETTE, IL 60091....., (insert name and address of principal) hereby revoke all prior powers of attorney for property executed by me and appoint:

.....ZEBA KIDWAI SIDDIQUI, 422 VINE COURT, WILMETTE , IL 60091.....

(insert name and address of agent)

RHSP FEE:\$9.00 RPRF FEE: \$1.00

KAREN A.YARBROUGH

COOK COUNTY RECORDER OF DEEDS

DATE: 10/30/2017 09:12 AM PG: 1 OF 8 | BOX 333 CTI

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## **UNOFFICIAL COPY**

(NOTE: You may not name co-agents using this form.) as my attorney-in-fact (my "agent") to act for me and in my name (in any way I could act in person) with respect to the following powers, as defined in Section 3-4 of the "Statutory Short Form Power of Attorney for Property Law" (including all amendments), but subject to any limitations on or additions to the specified powers inserted in paragraph 2 or 3 below:

(NOTE: You must strike out any one or more of the following categories of powers you do not want your agent to have. Failure to strike the title of any category will cause the powers described in that category to be granted to the agent. To strike out a category you must draw a line through the title of that category.)

(b)	Finarcial	institution transactions.	
<del>(c)</del>	Stoe' - and-	bond transactions.	
(d)	<del>Tangib</del> '↔r	oersonal-property transactions.	

(e) Safe-deposi box transactions.

(a) Real estate transactions.

-- (f) Insurance and annuity transactions.

(g) Retirement plan transactions.
(h) Social Security - imployment and military service benefits.

(i) Tax matters.

(j) Claims and litigat on.

(k) Commodity and option transactions.

(1) Business operations.

(m) Borrowing transactions.

(n) Estate transactions.

specifically referred to below.)

(o) All other property transactions

(NOTE: Limitations on and additions to the agent's powers may be included in this power of attorney if they are specifically described below.)

2. The powers granted above shall not include the following powers or
shall be modified or limited in the following particulars:
(NOTE: Here you may include any specific limitations you deem appropriate,
such as a prohibition or conditions on the sale of particular stock or rea
estate or special rules on borrowing by the agent.)
SPECIFIC TO MORTGAGE FINANCING FOR PROPERTY AT 3130 PHEASANT CREEK DR,

NORTHBROOK	I IL	
60062	: IL	
• • • • • • • • •		
3. In	addition to the powers granted above, I gr	ant my agent the
following	powers:	
(NOTE: Her	e you may add any other delegable powers i	ncluding, without
limitation	, power to make gifts, exercise powers of	appointment, name or
change ben	eficiaries or joint tenants or revoke or a	mend any trust

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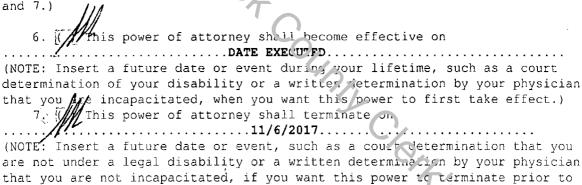
## **UNOFFICIAL COPY**

(NOTE: Your agent will have authority to employ other persons as necessary to enable the agent to properly exercise the powers granted in this form, but your agent will have to make all discretionary decisions. If you want to give your agent the right to delegate discretionary decision-making powers to others, you should keep paragraph 4, otherwise it should be struck out.)

- 4. My agent shall have the right by written instrument to delegate any or all of the foregoing powers involving discretionary decision-making to any person or persons whom my agent may select, but such delegation may be amended or revoked by any agent (including any successor) named by me who is acting under this power of attorney at the time of reference.

  (NOTE: Your agent will be entitled to reimbursement for all reasonable expenses incurred in acting under this power of attorney. Strike out paragraph 5 of you do not want your agent to also be entitled to reasonable compensation for services as agent.)
- 5. My agent shall be entitled to reasonable compensation for services rendered as agent under this power of attorney.

(NOTE: This power of attorney may be amended or revoked by you at any time and in any manner. Absent amendment or revocation, the authority granted in this power of attorney will become effective at the time this power is signed and will continue until your death, unless a limitation on the beginning date or duration is made by initialing and completing one or both of paragraphs 6 and 7.)



your death.)
(NOTE: If you wish to name one or more successor agents, insert the name and address of each successor agent in paragraph 8.)

8. If any agent named by me shall die, become incompetent, resign or refuse to accept the office of agent, I name the following (each to act alone and successively, in the order named) as successor(s) to such agent.

For purposes of this paragraph 8, a person shall be considered to be incompetent if and while the person is a minor or an adjudicated incompetent or disabled person or the person is unable to give prompt and intelligent consideration to business matters, as certified by a licensed physician. (NOTE: If you wish to, you may name your agent as guardian of your estate if a court decides that one should be appointed. To do this, retain paragraph 9, and the court will appoint your agent if the court finds that this appointment will serve your best interests and welfare. Strike out paragraph 9 if you do not want your agent to act as guardian.)

9. If a guardian of my estate (my property) is to be appointed, I nominate the agent acting under this power of attorney as such guardian, to serve without bond or security.

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## **UNOFFICIAL COPY**

10. I am fully informed as to all the contents of this form and understand the full import of this grant of powers to my agent.

(NOTE: This form does not authorize your agent to appear in court for you as an attorney-at-law or otherwise to engage in the practice of law unless he or she is a licensed attorney who is authorized to practice law in Illinois.)

(NOTE: This power of attorney will not be effective unless it is signed by at least one mitness and your signature is notarized, using the form below. The notary may not also sign as a witness.)

The undersigned witness certifies that .SHAHID SAEED SIDDIQUI....., known to me to be the same person whose name is subscribed as principal to the foregoing power of attorney, appeared before me and the notary public and acknowledged signing and delivering the instrument as the free and voluntary act of the principal, for the uses and purposes therein set forth. I believe him or her to be of sound mind and memory. The undersigned witness also certifies that the witness 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; or (d) an agent or successor agent under the foregoing power of

pated: September 6, 2017

Lee A. Campbell Witness tness, but other jurisdictions may

(NOTE: Illinois requires only one witness, but other jurisdictions may require more than one witness. If you wish to have a second witness, have him or her certify and sign here:)

(Second witness) The undersigned witness certifies that ......., known to me to be the same person whose name is subscribed as trincipal to the foregoing power of attorney, appeared before me and the notar, public and acknowledged signing and delivering the instrument as the free and voluntary act of the principal, for the uses and purposes therein set forth. I believe him or her to be of sound mind and memory. The undersigned witness also certifies that the witness 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; or (d) an agent or successor agent under the foregoing power of attorney.

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Dated:																					
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state of Illinois)
county of .Lake) ss.
The undersigned, a notary public in and for the above county and state,
certifies that SHAHID SAEED SIDDIQUI, known to me to be the
same person whose name is subscribed as principal to the foregoing power of
attorney, appeared before me and the witness ( Lee. H. Campbell (and
in person and acknowledged signing and delivering the
instrument as the free and voluntary act of the principal, for the uses and
purposes therein set forth (, and certified to the correctness of the
signatule(s) of the agent(s)). Dated:
My: commission expires $.5/30/2021$ Notary, Fublice
(NOTE: You may, but are not required to, request your agent and successor agents to provide specimen signatures below. If you include specimen signatures in this power of attorney, you must complete the certification opposite the signatures of the agents.)
OFFICIAL STAL
Specimen signatures of agent (and successors)  I certify that the signatures of NANCY E. GONZALEZ  Notary Public State (III)
Specimen signatures of agent (and successors)  I certify that the signatures of of my agent (and successors are genuine.  OFFICIAL SEAL NANCY E. GONZALEZ Notary Public - State of Illinois My Commission Expires 5/30/202
Specimen signatures of agent (and successors)  I certify that the signatures of of my agent (and successors are genuine.  OFFICIAL SEAL NANCY E. GONZALEZ Notary Public - State of Illinois My Commission Expires 5/30/202-
Specimen signatures of agent (and successors)  I certify that the signatures of of my agent (and successors are genuine.  OFFICIAL SEAL NANCY E. GONZALEZ Notary Public - State of Illinois My Commission Expires 5/30/202
Specimen signatures of agent (and successors)  I certify that the signatures of of my agent (and successors are genuine.  OFFICIAL SEAL NANCY E. GONZALEZ Notary Public - State of Illinois My Commission Expires 5/30/202-
Specimen signatures of agent (and successors)  I certify that the signatures of NANCY E. GONZALEZ Notary Public - State of Illinois My Commission Expires 5/30/202-
Specimen signatures of agent (and successors)  (agent)  (NOTE: The name, address, and phone number of the person preparing this form
Specimen signatures of agent (and successors)  (agent)  (NOTE: The name, address, and phone number of the person preparing this form or who assisted the principal in completing this form should be inserted below.)  Name: PINA KELLER
Specimen signatures of agent (and successors)  (agent)  (NOTE: The name, address, and phone number of the person preparing this form or who assisted the principal in completing this form should be inserted below.)  Name: PINA KELLER
Specimen signatures of agent (and successors)  (agent)  (NOTE: The name, address, and phone number of the person preparing this form or who assisted the principal in completing this form should be inserted below.)  Name: RINA KELLER.  Address: .111 S PFINGSTON.  DEERFIELD IL 60015.
Specimen signatures of agent (and successors)  (agent)  (NOTE: The name, address, and phone number of the person preparing this form or who assisted the principal in completing this form should be inserted below.)  Name: .RINA KELLER.  Address: .111 S PFINGSTON. DEERFIELD IL 60015.
Specimen signatures of agent (and successors)  (agent)  (NOTE: The name, address, and phone number of the person preparing this form or who assisted the principal in completing this form should be inserted below.)  Name: RINA KELLER.  Address: .111 S PFINGSTON.  DEERFIELD IL 60015.

#### "NOTICE TO AGENT

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 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;
- (4) attempt to preserve the principal's estate plan, to the extent actually known by the agent, if preserving the plan is consistent with the principal's best interest; and

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- (5) cooperate with a person who has authority to make health care decisions for the principal to carry out the principal's reasonable expectations to the extent actually in the principal's best interest As agent 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, your legal separation from the principal, or the dissolution of your marriage to the principal.

If you neve 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 whenever you act for the principal by writing or printing the name of the principal and signing your own name "as Agent" in the following manner:

"(Principal's Name) or (Your Name) as Agent"

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 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."

(f) The requirement of the signature of z witness in addition to the principal and the notary, imposed by Public Act, 91-790, applies only to instruments executed on or after June 9, 2000 (the offective date of that Public Act).

(NOTE: This amendatory Act of the 96th General Assembly deletes provisions that referred to the one required witness as an "additional witness", and it also provides for the signature of an optional "second vicness".)
(Source: P.A. 96-1195, eff. 7-1-11.)

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I, (SHAHID_SAEED_SIDDIQUIPrincipal), hereby appoint (ZEBA KIDWAI SIDDIQUI Agent), my (WIFE as my Attorney in Fact for the (purchase) of3130 PHEASANT CREEK DR, NORTHBROOK IL 60062   will be unable to attend the closing becauseI currently will be out of the country and will not be able to fly back due to work commitments (extenuating circumstance)	
Signed by Principal Shaha Saech Storag September 6, 20	17
Consider this almost as like a letter of direction.	
prepared by and return to:  Gail A. Canpbell  17501de Hatt Day Road  Suite 101  Lin colnstrue 11 (60069	
17501de Hatt Day Rood Suite 101	
Lincolnshuro 16 60069	
Lin coinsmo it do	
TS	

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#### **LEGAL DESCRIPTION**

Order No.: 17GL6103173SK

For APN/Parcel ID(s): 04-08-200-022-1008

PARCEL 1:

UNIT NO. 3130 IN PHEASANT CREEK CONDOMINIUM NO. 2, AS DELINEATED SURVEY OF PART OF PARTS OF THE FOLLOWING DESCRIBED PARCEL OF REAL ESTATE:

LOTS 'A' AND 'B' IN WHITE FLAIMS UNIT NO. 7, BEING A SUBDIVISION IN SECTION 8, TOWNSHIP 42 NORTH, RANGE 12, EAST OF THE THIRD PRINCIPAL MERIDIAN, AND ALSO THE 2 ACRES CONVEYED TO FREDERICK WALTER BY WARRANTY DEED RECORDED DECEMBER 4, 1849 AS DOCUMENT 24234, BEING THE EAST 20 RODS OF THE NORTH 16 RODS OF THE WEST 1/2 OF THE NORTHEAST 1/4 OF SAID SECTION 3 AND ALSO THE 1 ACRE CONVEYED TO THE CHURCH BY WARRANTY DEED RECORDED APRIL 30, 1851, AS DOCUMENT 29581 ALL TAKEN AS A TRACT, (EXCEPT FROM SAID TRACT THE NORTH 520.0 FEET OF THE WEST 742.00 FEET AND ALSO EXCEPTING THAT PART EAST OF THE WEST 642.0 FEET OF THE SAID TRACT AND NORTH OF A LINE 246.75 FEET SOUTH OF AND PARALLEL WITH THE NORTH LINE OF THE NORTHEAST 1/4 OF SAID SECTION 8), ALL IN COCY. COUNTY, ILLINOIS;

WHICH SURVEY IS ATTACHED AS EXHIBIT 'B' TO DECLA ATON OF CONDOMINIUM MADE BY CHICAGO TITLE AND TRUST COMPANY, A CORPORATION OF ILLINOIS, AS TRUSTEE UNDER TRUST NUMBER 40920 AND RECORDED AS DOCUMENT 22649814 AS AMENDED FROM TIME TO TIME, TOGETHER WITH ITS UNDIVIDED PERCENTAGE INTEREST IN THE COMMON ELEMENTS.

#### PARCEL 2:

EASEMENTS APPURTENANT TO AND FOR THE BENEFIT OF PARCEL 1 AS SET ! ORTH IN PHEASANT CREEK ASSOCIATION DECLARATION OF COVENANTS, CONDITIONS AND RESTRICTIONS, DATED MARCH 5, 1974 AND RECORDED MARCH 8, 1974 AS DOCUMENT 22648909 AND AS CREATED BY DEED FROM LASALLE NATIONAL BANK, AS TRUSTEF UNDER TRUST AGREEMENT DATED AUGUST 28, 1975 AND KNOWN AS TRUST NUMBER 49409 TO LEO NEWMAN AND BELLE NEWMAN, DATED MAY 28, 1976 AND RECORDED JUNE 3, 1976 AS DOCUMENT 23506329 FOR INGRESS AND EGRESS IN COOK COUNTY, ILLINOIS.