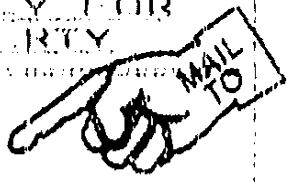


# UNOFFICIAL COPY

27A

ALL INTERESTS EXCEPTIBLE  
HEREIN IS OF  
FULL AND COMPLETE  
PROPERTY.



97558259

DEPT-01 RECORDING 627.50  
T90011 TRAN 8701 08/01/97 13:15:00  
#4807 & KF \*-97-558259  
COOK COUNTY RECORDER

MAIL TO: GARR AND  
DEMAERTELAERE LTD  
50 TURNER AVENUE  
ELK GROVE VILLAGE, IL 60007

2750

97558259

RECORDING NUMBER

THIS INSTRUMENT made this 17th day of May, 1997.

I, (we), Bruce D. Buchner and Roxanne Buchner, husband and wife in joint tenancy, hereby appoint LEE D. GARR OR ROY J. DE MAERTELAERE of the Law Firm of GARR & DE MAERTELAERE, LTD., "REAL ESTATE SERVICE CORPORATION'S AUTHORIZED REPRESENTATIVE, OR A duly authorized OFFICER OF THE REAL ESTATE SERVICE CORPORATION, as our attorney in fact (our "agent") to act for us and in our name (in any way we could act in person) with respect to transactions relating to Real Property commonly known as 1460 Brookside, Hoffman Estates, Illinois, 60196, (the "Property") and legally described as:

ATGF, INC

SEE EXHIBIT "A", ATTACHED HERETO.

I (we) grant our agent the following specific powers with respect to the Property:

(a) to make, execute and deliver any deed, mortgage or lease, whether with or without covenants or warranties, relating to the Property, to insert the name or names of the grantee(s) who will purchase the property and to make any and all necessary changes or additions to any such deed, mortgage or lease;

(b) to execute a listing and/or sale agreement for the Property;

(c) to enter upon and take possession of the premises, including, but not limited to, any buildings or other structures located on the Property;

\*NKA HFS MOBILITY SERVICES INC

(d) to obtain insurance of any kind, nature or description whatsoever on any of the Property and/or in connection with the management, use or occupation thereof and/or on any personal property belonging to me (us) on such property and/or relating to the rents, issues and profits arising therefrom, and to make, execute and file claims and/or proof(s) of all loss(es) sustained or claimable thereunder, and all other related instruments, and to make, execute and deliver receipts, releases or other discharges therefor, under seal or otherwise;

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\*NKA HFS MOBILITY SERVICES INC

(e) to demand, sue for, collect, recover and receive all goods, claims, debts, monies, interests and demands whatsoever now due, or that may hereafter be due or belong to me (us) (including the right to institute any action, suit or legal proceeding at law or in equity for the recovery of any such Property or any portion thereof which I (we) may be entitled to possess), and to make, execute and deliver receipts, releases or other discharges therefor, under seal or otherwise;

(f) to defend, settle, adjust, submit to arbitration and compromise all actions, suits, accounts, claims and demands whatsoever with respect to the Property which now are, or hereafter may be, pending between me (us) and any person, firm, association, corporation or other entity in such manner and in all respects as my (our) attorney shall think fit;

(g) to hire, accountants, attorneys at law, clerks, inspectors, appraisers, brokers, workmen and others, and to remove them, and to pay and allow to the persons so employed such salaries, wages or other remuneration as my (our) attorney shall think fit with respect to the Property;

(h) to constitute and appoint one or more attorneys for me (us) with full power of revocation; and

(i) without in any way limiting the foregoing, generally to do all other things reasonably necessary to maintain the Property and ultimately to convey it, or to lease said Property if necessary or do any other necessary act relating to the Property.

3. I (we) specifically authorize our agent to direct the title insurance company, if any, involved in any sale transaction relating to the Property to pay proceeds to the law firm of GIBB & DE MARTELLE, P.C., and, moreover, I (we) specifically assign and set over unto \*PHH Real Estate Services Corporation all of my/our right, title and interest in and to any mortgage escrow/impound fund account with any lender with which we may have or had a mortgage, any mortgage payments made by \*PHH Real Estate Services Corporation on my/our behalf, and any future refund or adjustment payments. By reason of the foregoing, \*PHH Real Estate Services Corporation is the real party in interest as seller of the Property for all purposes, including, but not limited to any federal, state or local tax and information reporting requirements.

I (we) do hereby ratify and confirm all acts whatsoever that my (our) attorney shall do or cause to be done relating to the Property by virtue of this Power of Attorney. To induce any third party to act hereunder, I (we) hereby agree that any third party receiving a duly executed copy or facsimile of this instrument may act hereunder, and that revocation or termination hereof shall be ineffective as to such third party unless and until actual notice or knowledge of such revocation or termination shall have been received by such third party, and I (we), for myself (ourselves) and for my (our) heirs, executors, legal representatives and assigns, hereby 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 relied upon the provisions of this Power of Attorney.

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4. My (our) 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 our Agent may select, but such delegation may be amended or revoked by any Agent (including any successor) named by us who is acting under this Power of Attorney at the time of reference.

5. (a) This Power of Attorney shall become effective upon my (our) signing of the same.

6. I (we) are fully informed as to all the contents of this form and understand the full import of this grant of powers to our Agent.

Signed: Bruce A. Buehrer  
Bruce A. Buehrer

Signed: Roxanne Buehrer  
Roxanne Buehrer

97558259

(THIS POWER OF ATTORNEY WILL NOT BE EFFECTIVE UNLESS IT IS NOTARIZED.)

State of Illinois )  
County of DeKalb ) SS

I, the undersigned, a Notary Public in and for the above County and State, certifies that Bruce A. Buehrer and Roxanne Buehrer, husband and wife in joint tenancy, known to me to be the same person(s) whose name(s) is/are subscribed as Principal(s) in the foregoing Power of Attorney, appeared before me in person and acknowledged signing and delivering the instrument as the free and voluntary act of the Principal(s), for the uses and purposes therein set forth.

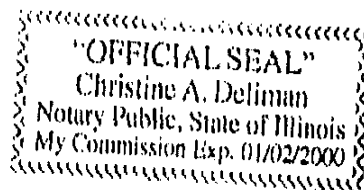
Dated: May 17, 1997.

Christine A. Deliman  
Notary Public

My commission expires: 1/2/2000

This document was prepared by:

GARR & DE MARTELLORE, LTD.  
Attorneys at Law  
500 Turner Avenue  
Elk Grove Village, Illinois 60007  
(847) 593-8777



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## EXHIBIT B

Lot 51 in Block 6 in Moon Lake Tracts Unit Two, being a subdivision of part of the Southeast Quarter of Section 7 and the Southwest Quarter of Section 8, Township 41 North, Range 10, East of the Third Principal Meridian, according to plat registered in the Office of the Registrar of Titles of Cook County, on July 27, 1978, as Document Number 3034859, in Cook County, Illinois.

Permanent Index Number: 07-07-600-027-0000

County Address: 1660 Brookside, Hillman Estates, Illinois, 60129

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EXHIBIT A:

LEGAL:

LOT 51 IN BLOCK 4 IN MOON LAKE TRAILS UNIT TWO, BEING A SUBDIVISION OF PART OF THE SOUTHEAST QUARTER OF SECTION 7 AND THE SOUTHWEST QUARTER OF SECTION 8, TOWNSHIP 41 NORTH, RANGE 10, EAST OF THE THIRD PRINCIPAL MERIDIAN, ACCORDING TO PLAT REGISTERED IN THE OFFICE OF THE REGISTRAR OF TITLES OF COOK COUNTY, ILLINOIS, ON JULY 27, 1978, AS DOCUMENT NUMBER 3034B59, IN COOK COUNTY, ILLINOIS.

PTN: 07-07-100-027-0000

COMMONLY KNOWN AS: 1460 BROOKSIDE DRIVE, HOFFMAN ESTATES, ILLINOIS 60194

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24. **Riders to this Security Instrument.** If one or more riders are executed by Borrower and recorded together with this Security Instrument, the covenants and agreements of each such rider shall be incorporated into and shall amend and supplement the covenants and agreements of this Security Instrument as if the rider(s) were a part of this Security Instrument.

{Check applicable box(es)}

- |                          |                        |                          |                                |                          |                        |
|--------------------------|------------------------|--------------------------|--------------------------------|--------------------------|------------------------|
| <input type="checkbox"/> | Adjustable Rate Rider  | <input type="checkbox"/> | Condominium Rider              | <input type="checkbox"/> | 1-4 Family Rider       |
| <input type="checkbox"/> | Deferred Payment Rider | <input type="checkbox"/> | Planned Unit Development Rider | <input type="checkbox"/> | Biweekly Payment Rider |
| <input type="checkbox"/> | balloon Rider          | <input type="checkbox"/> | Rate Improvement Rider         | <input type="checkbox"/> | Second Home Rider      |
| <input type="checkbox"/> | Other(s) [Specify]     |                          |                                |                          |                        |

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### NOTICE

Unless you provide us with evidence of the insurance coverage required by your agreement with us, we may purchase insurance at your expense to protect our interests in your collateral. This insurance may, but need not, protect your interests. The coverage that we purchase may not pay any claim that you make or any claim that is made against you in connection with the collateral. You may later cancel my insurance purchased by us, but only after providing us with evidence that you have obtained insurance as required by our agreement. If we purchase insurance for the collateral, you will be responsible for the costs of that insurance, including interest and any other charges we may impose in connection with the placement of the insurance, until the effective date of the cancellation or expiration of the insurance. The costs of the insurance may be added to your total outstanding balance or obligation. The costs of the insurance may be more than the cost of insurance you may be able to obtain on your own.

BY SIGNING BELOW, Borrower accepts and agrees to the terms and covenants contained in this Security Instrument and in any rider(s) executed by Borrower and recorded with it.

*Amitt N Patel* Borrower  
AMIT N PATEL

*Jagruti A Patel* Borrower  
JAGRUTI A PATEL

*Jagruti A Patel*

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(Space Below This Line For Acknowledgment)

STATE OF ILLINOIS  
COUNTY OF *Cook*

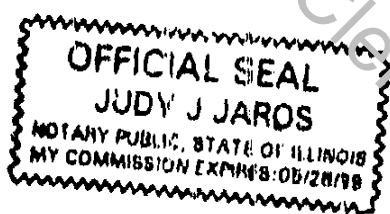
} SS:

I, *the undersigned* a notary public in and for said county and state, do hereby  
certify that *Arundhati A. Patel and Amit N. Patel, husband and wife*  
personally known to me to be the same person(s) whose name(s) *are* subscribed to the foregoing instrument,  
appeared before me this day in person, and acknowledged that *she* signed and delivered the same instrument  
as *their* free and voluntary act, for the uses and purposes therein set forth.

Given under my hand and official seal, this *14th* day of *July*, *1997*

My commission expires: *5/28/99*

*Judy J. Jaros*  
Notary Public



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