POWER OF ATTORNEY

This POWER OF ATTORNEY is made on this (date):\_\_\_\_\_\_\_\_\_\_\_\_by (name of person giving power of attorney):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ of (address of person giving power of attorney):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (ID Card no.\_\_\_\_\_\_\_\_)

I hereby appoint (name of person receiving power of attorney):\_\_\_\_\_\_\_\_\_\_\_\_\_\_

of (address of person receiving power of attorney)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(ID Card no.\_\_\_\_\_\_\_\_) as my Attorney to act in my capacity to do any of the following.

To handle all matters including the signing of all documents relating to my position as co-applicant to the MRF\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ housing loan taken from the Housing Development Finance Corporation Plc.(HDFC) for (address of mortgaging property \_\_\_\_\_\_\_\_\_\_\_\_\_\_, name of the road\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ,ward\_\_\_\_\_\_ postal code\_\_\_\_\_\_\_ island/city\_\_\_\_\_\_\_\_), Maldives, by (name of the person borrowing the loan:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, ID card no. of borrower\_\_\_\_\_\_\_\_\_\_ ), as I currently reside outside of the Maldives and therefore im unable to do myself.

This power of attorney shall commence on (date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_) and shall remain in force until expressly revoked by me in terms of a deed of revocation.

**signatures**

**IN WITNESS WHEREOF** this Power of Attorney has been executed by the Donor and takes effect on the day and year first above written.

**SIGNED FOR AND ON BEHALF OF THE DONOR**

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Position: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (if applicable)

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

……………………………………………..

*Signature*

**IN THE PRESENCE OF:**

|  |  |
| --- | --- |
| ……………………………………….*Signature of First Witness* | ……………………………………….*Signature of Second Witness* |
|  |  |
| Name ……………………………… | Name ……………………………… |
|  |  |
| Address ……………………………… ……………………………… | Address ……………………………… ……………………………… |
|  |  |
| Nationality/Passport No. ……………………………… | Nationality/Passport No. ……………………………… |

**ACKNOWLEDGMENT by the attorney**

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

……………………………………………..

*Signature*

**Instructions to Applicants:**

1. Witnessed should be unrelated independent persons
2. This Power of Attorney should be witnessed and registered at the relevant Maldivian Court of Law or if the parties are residing out of the country the POA must be notarized by a Notary Public or from a Maldivian Embassy/Consulate at the expenses of the Donor.
3. Donor should place their thumb print and initial all pages.
4. Name and relevant details must be as per ID card.
5. ID card copy of donor and Attorney must be attached.