

Affix recent
size Photo of
Grantor cross
signed

Affix recent
size Photo of
Attorney cross
signed

GENERAL POWER OF ATTORNEY

KNOW ALL MEN BY THESE PRESENTS THAT I/ we.....
_____ "the Grantor'(s), residing at _____

DO HEREBY NOMINATE APPOINT AND CONSTITUTE _____
_____, son/daughter of _____
_____ ('the Attorney' who has subscribed his/her
signature hereunder in token of identification) and at present residing at _____

to be my lawful Attorney in my/our name and on my/our behalf to do any one or all of the
following acts, deeds, matters, and things, namely:-

1. To prepare, fill up and sign the FORM-A/FORM-C and other related documents under the West Bengal Apartment Ownership Act, 1972 and to deposit Govt. fees/charges and submit all related papers/documents before the concerned/appropriate authority.
2. To receive, show, submit the original documents, the accepted/authenticated documents and to appear, sign, and represent those documents before the Competent Authority/ concerned Authority and also to resubmit the same before the appropriate authority(s) on my/our behalf, as he/she deems fit and proper.
3. To instruct/appoint the advocates/consultants for preparing and/or drafting such documents that are necessary for the process of completion of the matter under the West Bengal Apartment Ownership Act, 1972.
4. To rectify/modify the said documents and resubmit the same by putting his/her signature there on my/our behalf.
5. To receive the original letters/memos and Registration Certificate(s) from the Office of the Competent Authority by hand and to deliver the same to me/us.
6. To communicate the message/information regarding the progress of the action taken by him/her in the matter as stated in the above paragraphs to me/us from time to time.
7. ---

AND I/we agree to ratify all lawful acts, deeds, matters and things done by my Attorney pursuant to the powers herein before mentioned.

In Witness Whereof, I/we _____ have hereunto set
and

Subscribed my/our hands at

.....on.....

DL/PAN/Passport/Voter I.D./Aadhar number of Grantor(s): - _ _ _ _

DL/PAN/Passport/Voter I.D./Aadhar no. of Attorney:- _____

SIGNED and DELIVERED by

Name and Address of the Grantor(s)

Signature

in the presence of
Name & Address

DL/PAN/Passport/
Voter I.D./Aadhar number

Signature

1. _____

2. _____

I accept

Specimen signature of _____, the

Attorney of _____

Address of the Attorney Holder

_____ Nearest Landmark
_____ Dist.
_____ State
_____ PIN STD Code
_____ Phone No.
_____ Relation with Applicant

**Notary Stamp
& Seal**

Signature of Notary Public

Name & Address
