

GENERAL POWER OF ATTORNEY

KNOW ALL MEN BY THESE PRESENTS THAT I **Mr/Mrs/Miss** _____ **s/o,d/o,w/o** _____ presently resident of _____, make constitute, appoint, nominate and constitute to **Mr/Mrs/Miss** _____ **s/o,d/o,w/o** _____, presently resident of _____, as my attorney regarding my **Plot No** _____, **Street No** _____, **Block No** _____, situated at **Capital Smart City Islamabad**, measuring _____ **Marla/Kanal/Square Yards** having **MS No** _____ held in my name and on my behalf to do or execute all or any of the acts or things hereinafter mentioned that is to say:-

1. To sign/execute any documents deed or paper required to be signed or executed by the concerned authority.
2. To correspond with the concerned authority.
3. To take possession of the plot from any person and authority.
4. To construct the building on the plot and to do all acts, deeds and things necessary for the purposes e.g. submitting plans, getting them approved, getting water, electricity and Sui gas connections, engaging, architects, engineers, planners, contractors, masons, labour etc. procuring and purchasing the materials etc. To complete all formalities with the concerned authority for issuance of completion certificate and for execution of agreement and conveyance deed.
5. To retain, hire, lease, sell, convey, transfer, encumbrance, mortgage, redeem, exchange, release surrender, settle, adjust or otherwise dispose of the said plot of land and/or the building constructed thereon and for such consideration or with no consideration and in such manner as may be considered desirable, fit, proper, expedient and/or opportuned by my said attorney in his sole, absolute and unfettered discretion. To execute all kind of deeds and to get registered the same with the concern authority, to pay and receive all kind of payments in cash or through Cheque/pay order/draft/security deposit receipt etc and to cash the same with his own signatures and to obtain or issue the receipts thereof.
6. To obtain the Transfer Application Form, to complete the same and sign it, to submit the same in the office of concerned authority for the transfer of said plot of land and/or building constructed thereon in favour of anybody else.
7. To appear and act in all the courts, civil revenue or criminal, whether original or appellate, in the registration Offices and/or in any other office of Government or District Board, Municipal Board, concerned authority or Notified area or any other local authority. To engage any advocate

8. To Sign and verify complaints, written statements, petitions of claims and objections, memorandum of appeal and petitions and applications of all kinds and to file them in any such court or office.
9. To compromise, compound or withdraw cases, to confess judgements and to refer cases to arbitration. To file and receive back documents, to deposit and withdraw money and to grant receipts thereof. To obtain refund of stamp duty or repayment of court fees. To apply to courts and offices for copies of documents and papers. To apply for the inspection of and to inspect records. To accept service of any summons, notice or writ issued by any court of officer against me.
10. Generally, to do each and every thing requisite for all purposes stated above and the purposes which are omitted and are to be done on my part.
11. All the acts, deeds, matters and things done by the said General Attorney shall be constructed as having been done by me and I do hereby agree to ratify and confirm the same.
12. That this General Power of Attorney is made by me without any undue influence or coercion and in full knowledge of the facts and consequences of the General Power of Attorney made.

IN WITNESS THEREOF I have set my hand to this deed on this _____ day of _____ 2018, after understanding the contents of this deed in presence of the witnesses below.

Attorney Holder

Signature _____
Name _____
CNIC No _____
Date _____

Thumb Impression _____

Executant

Signature _____
Name _____
CNIC No _____
Date _____

Thumb Impression _____

WITNESS 1

Name _____
Signature _____
CNIC No _____

WITNESS 2

Name _____
Signature _____
CNIC No _____