## MONTANA REAL ESTATE POWER OF ATTORNEY

I,	(name), currently residing at
	(address), hereby appoint
	(agent s name), currently residing at
	(address), as my agent
(attorney-in-fact) to act for	or me in any lawful way with respect to the following limited
purpose(s) regarding real	estate: (initial all powers granted)
The power to man	age the real property located at,
which management duties	s may include, but are not limited to, the power to: sign agreements;
make repairs or perform r	maintenance; hire personnel to assist in such repairs or maintenance;
negotiate leases; set rents	; evict tenants; pay property taxes; pay insurance costs; and to do any
and all acts regarding the	management of the real property that I would otherwise have the power
to do.	
The power to sell t	he real property located at
Such power may include,	but is not limited to, the power to: hire and fire real estate agents or
real estate brokers; set, in	crease, or reduce the sale price; negotiate offers; execute contracts,
deeds, or any other docum	nents necessary for the sale; communicate with escrow agents; accept
the closing proceeds of ar	ny sale on my behalf; and to do any and all acts regarding the sale of the
real property that I would	otherwise have the power to do.
The power to pure	hase the real property located at
Such power may include,	but is not limited to, the power to: hire and fire real estate agents or
real estate brokers; make	and negotiate offers; execute contracts, deeds, or any other documents
necessary for the purchas	e; communicate with escrow agents; and withdraw and transmit the
funds for the purchase on	my behalf; and to do any and all acts regarding the purchase of the real
property that I would other	erwise have the power to do.



The power to rent the real property located at				
Such power may include, but is not limited to, the power to: hire and fire real estate agents or				
real estate brokers; apply for rental properties on my behalf; authorize any background check necessary for such rental; negotiate rents and costs; pay rental or associated fees; and to do any				
The power to refinance the real property located at				
Such power may include, but are not limited to, the power to: select the refinancing company;				
negotiate the terms of the refinancing; granting permission for home inspections or other items				
necessary for the refinancing; execute contracts or any other documents necessary for the				
refinancing; withdraw and transmit the funds for the refinancing on my behalf; and to do any and				
all acts regarding the refinancing of the real property that I would otherwise have the power to				
do.				
Other powers listed below:				
SPECIAL INSTRUCTIONS:				
THE FOREGOING POWERS ARE SPECIFICALLY INTENDED TO PERTAIN SOLELY				
AND BE LIMITED TO ALL DECISIONS AND ACTIONS TO BE MADE OR TAKEN IN				
CONNECTION WITH THE LIMITED PURPOSES DESCRIBED ABOVE.				
EFFECTIVE DATE:				
THIS POWER OF ATTORNEY IS EFFECTIVE IMMEDIATELY AND WILL CONTINUE				
UNTIL REVOCATION, MY DEATH, OR, 20				



(initial one choice below)	
THIS POWER OF ATTORNE	Y WILL CONTINUE TO BE EFFECTIVE EVEN
THOUGH I BECOME INCAPACITATE	CD.
THIS POWER OF ATTORNE	Y SHALL CEASE TO BE EFFECTIVE UPON MY
INCAPACITY.	
Successor Attorney- in-Fact. If	(agent's name) is unable or unwilling to
serve or to continue to serve as my attorne	ey-in-fact for any reason, then
(alternate agent's name), presently residin	ng at
(address) is hereby appointed successor at	
I agree that any third party who re	ceives a copy of this document may act under it.
Revocation of the power of attorney is no	t effective as to a third party until the third party has
-	ee to indemnify the third party for any claims that arise
against the third party because of reliance	
Signed this day of	, 20
(signature)	
(Signature)	
(printed name)	



## **ACKNOWLEDGMENT**

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

STATE OF MONTANA	)	
	) ss	
COUNTY OF	)	
On	before me	
on	octore me,	(insert name and title of the officer)
personally appeared		, who proved to me on the
instrument and acknowledged authorized capacity(ies), and	I to me that he/she that by his/her/the	s) whose name(s) is/are subscribed to the within s/they executed the same in his/her/their eir signature(s) on the instrument the person(s), acted, executed the instrument.
I certify under PENALTY OF foregoing paragraph is true an		r the laws of the State of Montana that the
WITNESS my hand and offic	ial seal.	
a:		
Signature		(seal)



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category Real Estate Power of Attorney Template.

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Montana Power of Attorney Forms.

