## **Property Management Power of Attorney**

Date:
Landlord (Principal) Name:
Address:
Phone:
Agent (Attorney-in-Fact) Information
Name:
Address:
Phone:
Property Description
Property Address:
Legal Description:
Powers Granted
<ul> <li>To lease, rent, and manage the property described above.</li> <li>To collect rents and issue receipts.</li> <li>To enter into, renew, or terminate tenancy agreements.</li> <li>To make payments for utilities, repairs, and associated expenses.</li> <li>To handle repairs, maintenance, and improvements as needed.</li> <li>To represent the principal in legal matters relating to the property.</li> </ul>
Duration
This power of attorney shall begin on:
And will (select one):
□ remain in effect until revoked in writing by Principal □ expire on
Signatures
Principal Signature:
Date:
Agent Signature:
Date:
Notary Acknowledgment
State of:

County of:		_	
On this	day of	,	, before me appeared
		and	, who proved to me on the basis of
satisfactory evi they executed i		ne persons whose I	names are subscribed to this instrument, and acknowledged
Notary Public S My commission	_		