

# Power of Attorney Process

The information provided to us indicates that one or more of the Borrowers for this HomeEquity Bank mortgage will be represented by one or more Powers of Attorney (POA).

## Initial required documents

- 1 Power of Attorney document
- 2 Completed POA questionnaire (form enclosed)
- 3 Power of Attorney Identification - One (1) piece of Government Issued Photo Identification\*
- 4 Borrower/Applicant Identification - Two (2) pieces of Identification\*

Please email the above listed documents to your representative at HomeEquity Bank. Upon receipt of the requested documents, HomeEquity Bank will review and confirm if the executed POA can be used for this mortgage transaction.

# Power of Attorney Questionnaire

## To be completed by the Sales Representative

- 1 Complete questionnaire for each client for whom a POA is being used.
- 2 If more than one POA is required to act on behalf of the client, please complete a separate questionnaire for each POA.
- 3 This form must be completed, signed and submitted to HomeEquity Bank for review along with following supporting documentation:
  - POA document
  - Acceptable photo ID for POA(s) and client

Client Name \_\_\_\_\_ Property Address \_\_\_\_\_

POA Name \_\_\_\_\_ POA Address \_\_\_\_\_

Mortgage amount requested \_\_\_\_\_ Number of POA(s) \_\_\_\_\_

- 1 Why is the POA being used?  
 client is physically incapacitated       client is mentally incapacitated  
 others, please specify \_\_\_\_\_
- 2 What are the funds being used for? *(Be as specific as possible)* \_\_\_\_\_  
\_\_\_\_\_
- 3 Who is receiving direct benefit from this transaction? \_\_\_\_\_
- 4 What is the relationship of the POA(s) to the client? \_\_\_\_\_
- 5 What is the POA's current occupation? \_\_\_\_\_
- 6 Who is the POA's current employer \_\_\_\_\_
- 7 Is the POA a politically exposed person? \_\_\_\_\_
- 8 Is the client living in the subject property? (Yes or No) \_\_\_\_\_



# Power of Attorney Questionnaire

## POA Document

- 9 What date was the POA prepared? \_\_\_\_\_
- 10 What is the relationship of the witness to the POA(s)? \_\_\_\_\_
- 11 Where was the POA prepared and signed? \_\_\_\_\_
- 12 Who prepared the POA? \_\_\_\_\_

## Emergency contact information

Name of Contact \_\_\_\_\_ Tel \_\_\_\_\_ Relationship \_\_\_\_\_

Sales Representative Signature \_\_\_\_\_ Date \_\_\_\_\_

