

Oklahoma Limited Power of Attorney

BE IT ACKNOWLEDGED that I, _____,
the "Principal", do hereby grant a limited and specific power of attorney to:

Oakwood Harbor Lot Owners Association

Address: 416949 E. 1076 Road Checotah, Oklahoma 74426 as my "Attorney-in-Fact".

Said Attorney-in-Fact shall have full power and authority to undertake and perform only the following acts on my behalf:

- To allow Oakwood Harbor Lot Owners Association the right to enforce the covenants in regard to trespassing in the event that Oakwood Harbor is unable to contact me after due diligence or if Oakwood Harbor Lot Owners Association deems, at its discretion, an emergency to act immediately to avoid significant loss or damage to property, personal injury, or poses an imminent threat of same to other property owners within the legal description of all said properties within Oakwood Harbor. This shall apply to all lots owned by myself within Oakwood Harbor unless otherwise specified within this document.
- To allow Law Enforcement Agencies, or emergency responders entry to property in the event of an emergency to prevent or protect against damage or loss of property or deems an imminent threat to loss or damage of property, or poses an imminent threat to bodily harm of myself or any other property owner.
- Exceptions or additional rights allowed

The authority herein shall include such incidental acts as are reasonably required to carry out and perform the specific authorities granted herein. My Attorney-in-Fact agrees to accept this appointment subject to its terms and agrees to act and perform in said fiduciary capacity consistent with my best interest, as my Attorney-in-Fact in its discretion deems advisable. This power of attorney is effective upon execution.

This power of attorney may be revoked by any of the following:

(Initial and Check the Box if Applicable)

_____ - By the Principal at any time by authorizing a Revocation.

_____ - When the above stated one (1) time power or responsibility has been completed. _____ - On the ____ day of _____, 20__.

This power of attorney form shall automatically be revoked upon my death or incapacitation, provided any person relying on this power of attorney shall have full rights to accept and reply upon the authority of my Attorney-in-Fact until in receipt of actual notice of revocation.

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State Law. This Power of Attorney is governed by the laws of the State of Oklahoma.

Signed this ____ day of _____, 20__.

Signature

Print Name

ACCEPTANCE OF APPOINTMENT

I, _____, the attorney-in-fact named above, hereby accept appointment as attorney-in-fact in accordance with the foregoing instrument.

Attorney-in-Fact's Signature

Attorney-in-Fact's Printed Name

ACKNOWLEDGMENT OF NOTARY PUBLIC

STATE OF _____

_____ County, ss.

On this ____ day of _____, 20__, before me appeared _____, as Principal of this Power of Attorney who proved to me through government issued photo identification to be the above-named person, in my presence executed foregoing instrument and acknowledged that he executed the same as his free act and deed.

Notary Public

My commission expires: _____