

STATE OF NORTH CAROLINA

LIMITED POWER OF ATTORNEY
FOR THE NORTH CAROLINA
SOIL AND WATER CONERVATION COMMISSION
COST SHARE PROGRAM

COUNTY OF _____

KNOW ALL MEN BY THESE PRESENTS, that _____, a North Carolina corporation doing business in and around the City of _____, County of _____, State of _____, does hereby make, constitute and appoint _____, of the City of _____, County of _____, State of _____, its true and lawful attorney-in-fact for itself and in its name, place and stead, giving unto said _____, full power to act in its name, place and stead in any way which it could do by proper action of its corporate officers with respect to participation in the N.C. Soil and Water Conservation Commission Cost Share Program (the “Program”), specifically including the following powers checked below:

access to any and all records maintained by _____ Soil and Water Conservation District;

signing of documents or entering into agreements, both written and oral;

making application to the Program to request assistance;

making decisions on best management practices to be installed;

requesting and receiving payments for best management practices that have been installed and approved for payment pursuant to the terms of the Program;

canceling or authorizing cancellation of agreements.

Further said corporation hereby ratifies and affirms any actions that _____ shall lawfully do or cause to be done as said attorney in fact with respect to the transaction contemplated herein. This Power of Attorney shall remain in full force and effect until written notice of its revocation has been duly served upon the _____ Soil and Water Conservation District. Copies of it shall remain on file in the _____ Soil and Water Conservation District office and in the office of the North Carolina Division of Soil and Water Conservation. A certified copy of the corporate resolution authorizing this Power of Attorney is attached hereto as “Exhibit A.”

This the _____ day of _____, 202__.

_____, a
_____ corporation

(Corporate Seal)

ATTEST:

By: _____
Name: _____
Title: _____
EIN: _____

(Asst.) Secretary

_____ COUNTY

I, the undersigned, a Notary Public for said County and State, certify that _____, personally came before me this day and acknowledged that (s)he is Secretary of _____, a North Carolina corporation, and that by authority duly given and as the act of the corporation, the foregoing instrument was signed in its name by its _____ President, sealed with its corporate seal, and attested by her/himself as its (Asst.) Secretary.

Witness my hand and official seal or stamp, this the ____ day of _____, 202__.

Notary Public
Stamp/Seal

My Commission Expires: