



# Affidavit of attorney-in-fact

Power of Attorney document must currently be on file or attached to this form.

Principal: \_\_\_\_\_

Attorney-In-Fact: \_\_\_\_\_

Date POA Executed: \_\_\_\_\_  
*(Date POA document was signed and notarized by the Principal)*

I, the undersigned party acting as Attorney-In-Fact under a Power of Attorney, do hereby declare under penalty of perjury that the Power of Attorney currently on file with CIT Bank, N.A., or attached, is valid and to the best of my knowledge has not been terminated by revocation or by the principal's death or incapacity.

\_\_\_\_\_  
Attorney-In-Fact's Signature

\_\_\_\_\_  
Date

**SIGNATURE MUST BE NOTARIZED  
WITH ACKNOWLEDGMENT**

Bank Use Only	
Accepted by: _____	Date: _____
Branch Name and Number _____	