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 Carolina corporation doing business in and around the state of th	S, that		, a North
Carolina corporation doing business in and around	nd the City of	, County of	, State of North
Caronna, does nereby make, constitute and appo	01nt	, or the City of	, County of
, State of North Carolina, its tru	ie and lawful attorney-i	n-fact for itself and in its r	name, place and
stead, giving unto said	full power to act in	n its name, place and stead	in any way which it
could do by proper action of its corporate offi	cers with respect to p	participation in the N.C.	Soil and Water
Conservation Commission Cost Share Program	(the "Program"), speci	fically including the follow	wing powers checked
below:		,	
access to any and all records maint Conservation District;	tained by	Soil and Water	
signing of documents or entering into a the Program to request assistance;	agreements, both writte	n and oral; making application	ation to
making decisions on best management	practices to be installe	d;	
requesting and receiving payments for	· best management pra	ctices that have been insta	alled and
approved for payment pursuant to the t		ones mar nave seen mou	
canceling or authorizing cancellation o			
Further said corporation hereby ratifies a	and affirms any actions t	hatshall law	fully do or cause to be
done as said attorney in fact with respect to the tr	ansaction contemplated	herein. This Power of At	torney shall remain ir
full force and effect until written notice of its			
Conservation District. Copies of it shall remain o	n file in the	Soil and Water Conservat	tion District office and
in the office of the North Carolina Division of So	il and Water Conservat	ion. A certified copy of th	e corporate resolution
authorizing this Power of Attorney is attached he	ereto as "Exhibit A."		
This the day of, 202			
	NAME O	F CORPORATION,	
		arolina corporation	
	u rvorur e	aroma corporation	
	By:		
	N		
(Corporate Seal)	Title:		
(1 /	EIN:		
ATTEST:	_		
(Asst.) Secretary			
NORTH CAROLINA			
COUNTY			
	110		
I, the undersigned, a Notary Public for	said County and State,	certify that	
personally came before me this day and acknow. North Carolina corporation, and that by authority	ledged that (s)ne is Sec	retary of	, a
North Carolina corporation, and that by authority	y duly given and as the	act of the corporation, the	e toregoing
instrument was signed in its name by itsP its (Asst.) Secretary.	resident, sealed with it	s corporate sear, and attest	ed by her/himsen as
its (Asst.) Secretary.			
Witness my hand and official seal or sta	amn this the day	of 202	
Transis my hand and official seaf of su	ump, umb unc uay		
	My Commission	Expires:	
Notary Public	, commission	P	
Stamp/Seal			