

PSV1 # 2308

## ***CONTINUING POWER OF ATTORNEY FOR PROPERTY - (SHORT FORM)***

**THIS CONTINUING POWER OF ATTORNEY FOR PROPERTY** is given by Mr. Ghassan Fayyad, of the City of Toronto, Mississauga.

### ***APPOINTMENT***

1. **I APPOINT Mr. Omar Shaaath** of the City of Mississauga in the Province of Ontario to be my attorney for property, and I authorize my attorney to do, on my behalf, any and all acts, which I could do if capable, except make a will, subject to any conditions and restrictions contained herein. My attorney shall have the authority to act as my litigation guardian, if one is required to commence, continue, defend or represent me in any court proceeding.

### ***SUBSTITUTION***

2. If the above appointed attorney refuses to act, or is or are unable to act by reason of death, court removal, becoming incapacitated or resignation, **I SUBSTITUTE AND APPOINT Ms. Chaza Khalil**, of City of Mississauga, in the Province of Ontario to act as my attorney(s) for my property, in the place of any attorney(s) appointed in paragraph 1 hereof. The substituted attorney(s) shall, if able and willing to act, thereafter be my attorney(s) for property and I authorize him, her or them thereafter to do, on my behalf, any and all acts which I could do, if capable, except make a will, subject to any conditions and restrictions contained herein.

### ***CONTINUING POWER***

3.
  - a) In accordance with section 7 of the *Substitute Decisions Act*, I declare that this power of attorney may be exercised during any subsequent legal incapacity on my part.
  - b) I declare that, after due consideration, I am satisfied that the authority conferred on the attorney named in this power of attorney is adequate to provide for the competent and effectual management of all my property in case I should become a patient in a psychiatric facility and be certified as not competent to manage my property under the *Mental Health Act*. I therefore direct that in that event, the attorney named in this power of attorney may retain this power of attorney for the management of my property in accordance with subsection 54(6) of the *Mental Health Act* and in that case the Public Trustee shall not become committee of my property as would otherwise be the case under subsection 54(5) of the *Mental Health Act*.
  - c) It is my intention and I so authorize my attorney that this authority shall be exercised during any incapacity on my part to manage my property, pursuant to sections 7 and 14 of the *Substitute Decisions Act*.

## FAMILY LAW ACT CONSENT

4. If my spouse disposes of or encumbers any interest in a matrimonial home in which I have a right to possession under Part II of the *Family Law Act*, I authorize the attorney named in this power of attorney for me and in my name to consent to the transaction as provided for in clause 21(1)(a) of the said Act.

## CONDITIONS AND RESTRICTIONS

5. This Continuing Power of Attorney for Property is only to be used for any and all dealings with the property at Park Side Village – Tower One, Suite 2307, Level 22, Style 11.

## EFFECTIVE DATE

6. This continuing power of attorney for property comes into effect as of the date of execution set out below.

## REVOCATION

7. Any prior power of attorney for property or any power of attorney which affects my property given by me, except a power of attorney given to a bank or financial institution for the purpose of transacting my business with that bank or financial institution, is hereby revoked

## COMPENSATION

8. I authorize my attorney and my attorney has agreed to accept [NO] compensation for any work done by her pursuant to this power of attorney for property.

Executed at the City of Abu Dhabi, United Arab Emirates, this 04<sup>th</sup> day of March, 2012, in the presence of both witnesses, each present at the same time.

Witness Wissam Hourani  
Print name and address UAE-ABUDHABI

Witness ESMA ELBOURGY  
Print name and address  
JAE-ABUDHABI

Mr. Fuad Mashal

original notarized will be sent in 10 days

*[Handwritten signature]*

**Ontario**

**Driver's Licence**  
**Permis de conduire**  
**ON CANADA**



**12 NAME/NO**  
FAYYAD, GHASSAN

**8 22 BIRTH/NAISS**  
CRES

**11 ADDRESS/ADRESSE**  
M/11111111, ON, L6C 2C9

**14 NUMBER/NUMERO**  
F0975 - 28206 - 60403

**15 ISS/DEL**  
2011/07/21

**16 DO/REF**  
GC1518560

**17 SEX/SEX**  
M

**18 CLASS/CLASSE**  
G

**19 CATE**  
X

**20 REG**  
COND

**21 DOB/DOB**  
1966/04/03

**22 ID**  
0140502

**16 HGT/HAUT**  
178

**17 EXP/EXP**  
2011/07/21

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3307