

Form 2 Power of Attorney

Updated May 2013

Office of the Superintendent of Insurance Department of Finance, Government of Nunavut 2nd floor Parnaivik Building, 924 Mivvik Street P.O. Box 2260, Iqaluit, Nunavut, XOA 0H0

		(Insurer)
being an incorporated company, incorporated under the laws of:		(Prov / State of Head Office)
applying for a licence from the Superintendent of Insurance of Nunavut to effect		effect contracts of: (Classes of Insurance)
and other classes of insurance wi	thin Nunavut, under the <i>Insurance Act</i> , do	eclare, constitutes and appoints:
		(Name of Chief Agent)
of		(Address of Chief Agent)
in those actions and pr given or that is thought a	roceedings and to receive from the Superior dvisable to give. The Company declares the Chief Agent named in this power of attor	Nunavut for any liability incurred by the Company ntendent all notices that the law requires to be not service of notice of process for or in respect of rney is legal and is binding on the Company. (Name of Company)
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and signed by its duly authorized	offices on:	(Date)
Signed in the presence of:		(Signature of President)
		(Signature of Secretary)
ı,	of	
in make oath and say that and		executed the Power of Attorney
n my presence on	at	executed the Fower of Attorney
in		and that they hold the offices of
respectively in the Company refe	rred to in the Power of Attorney.	<u> </u>
Sworn before me at	(Place) on	(Date)
		(Signature of Witness)