

SPECIAL POWER OF ATTORNEY FORM – DUBAI

Prepared by POA&More; – Legal & Notary Services

This Special Power of Attorney (SPA) allows the Principal to authorize another person (the Attorney-in-Fact) to act on their behalf in legal, financial, or personal matters within the United Arab Emirates. Please complete all required fields clearly and accurately.

1. PRINCIPAL INFORMATION

Full Name:

Nationality:

Passport / Emirates ID Number:

Residential Address:

Phone Number:

Email Address:

2. ATTORNEY-IN-FACT INFORMATION

Full Name:

Nationality:

Passport / Emirates ID Number:

Residential Address:

Phone Number:

Email Address:

3. AUTHORITY GRANTED

Describe the powers granted to the Attorney-in-Fact:

4. VALIDITY OF THIS POWER OF ATTORNEY

This SPA shall remain valid until (select one):

- ☐ A specific date: _____
- ☐ Until revoked by the Principal
- ☐ Until completion of the specific task(s) stated above

5. DECLARATION

I, the Principal, hereby give and grant full authority to my Attorney-in-Fact
to act on my behalf in accordance with the powers stated above.

SIGNATURES

Principal Signature: _____	Attorney-in-Fact Signature: _____
Date: _____	Date: _____

WITNESSES

Witness 1 Name & Signature: _____	Witness 2 Name & Signature: _____
Date: _____	Date: _____

Prepared by POA&More; – Your Trusted Partner for Notary & Legal Services in Dubai.