

Power of Attorney (For General Purpose)



Mandatary

Name		Resident Registration No.	Number of Passport, Alien Registration, or Resident Registration
Address		Contact Details	Tel : Fax : E-mail :

I/We, the Mandator(s), hereby constitute and appoint the person/entity above as my/our true and lawful Mandatary (the "Mandatary") with full power and authority to perform the following in the name and on behalf of me/us:

Details of Mandate

I/We, the Mandator(s), hereby declare that all documents and instruments in writing authorized to be executed by this Power of Attorney shall be properly executed and complete in all respects and shall bind me/us if signed by the Mandatary, and that such documents and instruments signed by the Mandatary shall in no event require my/our company seal to make them valid and binding upon me/us.

This Power of Attorney shall, unless expressly revoked or terminated in writing by me/us, continue in full force and effect until YYYY/MM/DD.

Executed on behalf of the Mandator as of YYYY/MM/DD.

Company Name	<i>Company Stamp(if only)</i> <i>Name & Title of Signatory(if only)</i>	<i>Authorized Signature and/or Seal of Company</i>
Corporate(Resident) Registration No.		
Contact Details	Tel : Fax : e-mail :	
Address		

※ Attachment : Certificate of Registered Company Seal of the Mandator or equivalent certificates

To Seoul Guarantee Insurance Company

[TO BE NOTARIZED]