Please send the completed form of the power of attorney with a copy of the appropriate identity document or current extracts from the appropriate register of the Shareholder (Mandatory) enclosed to Dom Development S.A. scanned in PDF format to the e-mail address: wza @domd.pl

## **POWER OF ATTORNEY**

to attend the Ordinary General Shareholders Meeting of Dom Development S.A. with its registered seat in Warsaw to be held on 27 May 2021 and to exercise any rights of shares

**Shareholder (Mandatory) details:** 

Name and surname / Name of Company:	
Address / Registered seat, address:	
Number and spring of the identity described with a series	d ou manage with and DECEL mumber / Decision Count
Number and series of the identity document (identity card Division, No. KRS (or another register, number):	or passport) and PESEL number / Registry Court,
NIP / REGON number:	Share capital:
Contact telephone number and e-mail address:	
I/We, the undersigned, hereby grant the person/ er	ntities having no legal personality whose details are
to be found below power of attorney to attend the	ne Ordinary General Shareholders Meeting of the
company Dom Development S.A. with its registered	d seat in Warsaw to be held on 27 May 2021 and to
exercise on behalf of the Shareholder any rights	s of shares, including voting rights, to which the
Shareholder is entitled as the owner of shares of	Dom Development S.A. with its registered seat in
Warsaw, in the number of:	
in accordance with the individual certificate con	firming the right to attend the Ordinary General
Shareholders Meeting of the Dom Development S.A	A. with its registered seat in Warsaw on 27 May 2021
issued by:	
Name of the issuer:	
Number of the issuer.	
Number of a selfication	
Number of certificate:	
Additional information, clauses, exclusions, special rights	s of the proxy:

Dom Development S.A. scanned in PDF format to the e-mail address: wza@domd.pl
Proxy details:

Name and surname / Name of Company:

Address / Registered seat, address:

Number and series of the identity document (identity card or passport) and PESEL number / Registry Court,
Division, No. KRS (or another register, number):

NIP / REGON number:

Share capital:

Contact telephone number and e-mail address:

Knowing the legal consequences of any false testimonies arising from art. 233 of the Penal Code, I/We hereby confirm that the information presented above is truthful and factually correct.

Signature of the Shareholder or signature(s) of the person(s) authorized to represent the Shareholder (Mandatory): Date and place:

Please send the completed form of the power of attorney with a copy of the appropriate identity document or current extracts from the appropriate register of the Shareholder (Mandatory) enclosed to