

POWER OF ATTORNEY

Date: _____

I/We _____, hereby name and appoint
_____ to be my/our lawful attorney and to act for me/us
to apply for certificate of title or registration.

Year _____ Make _____

Vehicle Identification Number _____

_____ X _____
Print Owners Name Signature of Owner Date

_____ X _____
Print Owners Name Signature of Owner Date

_____ Address City/State Zip Telephone #

STATE OF _____

COUNTY OF _____

The signature of _____ was subscribed and
sworn to before me on this the _____ day of _____ in the year of _____.

Notary/Justice of the Peace

Signed _____

Printed _____

My Commission expires _____

***THIS FORM MUST BE NOTARIZED**

Note: Please sign name(s) as they appear on the title.