



555 WRIGHT WAY
CARSON CITY, NV 89711-0700
Reno/Sparks/Carson City (775) 684-4DMV (4368)
Las Vegas Area (702) 486-4DMV (4368)
dmvnv.com

POWER OF ATTORNEY

Please print or type

KNOW ALL MEN BY THESE PRESENTS

That the undersigned, \_\_\_\_\_

in the County of \_\_\_\_\_ State of \_\_\_\_\_

being the Registered and/or Legal Owner of the following described motor vehicle:

Year \_\_\_\_\_ Make \_\_\_\_\_ Model \_\_\_\_\_

Vehicle Identification Number \_\_\_\_\_

Does hereby make, constitute and appoint \_\_\_\_\_

of the County of \_\_\_\_\_ State of \_\_\_\_\_,

true and lawful Attorney in Fact to sign in the name, place and stead of the undersigned, any and all documents, including but not limited to Certificate of Title and/or Vehicle Registration Certificate, issued by the Department of Motor Vehicles of the State of Nevada (NV DMV), or issued by another state to the extent authorized by that state's law and within the scope of the NV DMV's authority to require and/or accept such signed documents, covering the motor vehicle described above, in whatever manner necessary to transfer any Registration Certificate and/or secure, transfer, and/or release any Certificate of Title. Granting and giving unto said Attorney in Fact, full authority and power to do and perform any and all acts authorized hereby, as fully to all intents and purposes as the grantor might, or could do if personally present, with full power of substitution.

Note: This form may not be used to disclose the odometer reading of a vehicle.

Full Legal Name \_\_\_\_\_
First Middle Last

Nevada Driver's License, Identification Card
Number, Date of Birth, or FEIN for a business \_\_\_\_\_

Physical Address \_\_\_\_\_
Street City State Zip Code

Mailing Address \_\_\_\_\_
Street City State Zip Code

State of Nevada, County \_\_\_\_\_

Subscribed and sworn to before on \_\_\_\_\_ by \_\_\_\_\_
Date Signature of person granting power of attorney

Notary Public or Authorized Nevada DMV Representative Signature

Notary Stamp