# RHODE ISLAND MOTOR VEHICLE POWER OF ATTORNEY

**KNOWN BY ALL PERSONS BY THESE PRESENTS,** that

[ PRINCIPAL NAME ] (“Principal”) with a mailing address of

[ PRINCIPAL ADDRESS ] grants to

[ AGENT NAME ] (“Agent”) with a mailing address of

[ AGENT ADDRESS ] or its designated representative for an indefinite period of time or until canceled in writing, a limited power of attorney, to act on its/his/her behalf, with regard to all matters pertaining to the registering, licensing, transfer of ownership, and/or titling of the vehicle listed below with the applicable motor vehicle agency in the State of Rhode Island.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **YEAR** | **MAKE** | **MODEL** | **VIN (17 Characters)** | **ODOMETER** |
| [YYYY] | [MAKE] | [MODEL] | [VIN] | [ODOMETER] |

Principal’s Date of Birth: [ MM/DD/YYYY ]  
Principal’s Social Security Number (SSN): [ # ]

**PRINCIPAL’S SIGNATURE:** [\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_](https://esign.com/) Date: [ MM/DD/YYYY ]

**- - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - -**

**NOTARY ACKNOWLEDGMENT**

STATE OF [ STATE ]

COUNTY OF [ COUNTY ] ss.

Before me personally appeared the above-named [ PRINCIPAL NAME ], (Individual / Company Name) acting as Principal for the above-mentioned vehicle and duly acknowledged the foregoing instrument to be his/her free act and deed in his/her individual capacity or, if the representative of a company, acknowledges that he or she is duly authorized to sign the foregoing instrument on behalf of the company.

**NOTARY SIGNATURE:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Print Name: [ NOTARY NAME ] My Commission Expires: [ MM/DD/YYYY ]

(Seal)