

CAPITAL CITY

AUTO TITLE

LIMITED POWER OF ATTORNEY

DATE _____ YEAR: _____ MAKE: _____ MODEL: VIN: _____ I, _____, appoint _____ As my attorney in fact to sign all documents necessary to dispose of the above described vehicle or obtain a marketable title in my name for same vehicle. **OWNER SIGNATURE** SWORN TO AND SUBSCRIBED BEFORE ME THIS _____ DAY OF _____, 20___. NOTARY PUBLIC WITNESS SIGNATURE OWNER SIGNATURE WITNESS PRINTED NAME WITNESS SIGNATURE WITNESS PRINTED NAME AFFIDAVIT BY WITNESS

BEFORE ME, NOTARY, THE UNDERSIGNED, AFTER BEING DULY SWORN, DID DEPOSE AND SAY THAT HE/SHE IS A WITNESS TO THS DOCUMENT AND THAT THE SINGATURES OF THE CUSTOMER AND DEALER REPRESENTATIVE THERETO ARE TRUE AND GENUINE AND AFFIXED HERETO OF THEIR OWN FREE WILL IN THE PRESENCE OF WITNESSES WHOSE NAMES ARE AFFIXED THERETO.

NOTARY PUBLIC

WITNESS SIGNATURE

WITNESS PRINTED NAME