

RHODE ISLAND MOTOR VEHICLE POWER OF ATTORNEY

Known by all persons by these presents, that _____ (the "Principal") with a mailing address of _____ grants to _____ (the "Agent") with a mailing address of _____ 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	ODOMETER

Principal's Date of Birth: _____ (mm/dd/yyyy)

Principal's Social Security Number (SSN): _____

Principal's Signature: _____ Date: _____

NOTARY ACKNOWLEDGMENT

STATE OF _____
COUNTY OF _____ ss.

Before me personally appeared the above-named _____, (Principal) 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: _____ My Commission Expires: _____

(Seal)

