POWER OF ATTORNEY

Date: _____

I/We _____ , hereby name and
Name

appoint _____ to be my/our lawful attorney and to act
Name

for me/us to apply for certificate of title or registration.

Year _____ Make _____

Vehicle Identification Number _____

_____ X _____
Print Owners Name Signature of Owner Date

_____ _____
Print Owners Name X Signature of Owner Date

_____
Address City/State Zip Telephone #

The signature of _____ was subscribed and

sworn to before me at _____ NH county of _____

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.

TITLE 5(Rev. 10/07)