



# Georgia Department of Revenue - Motor Vehicle Division

## Limited Power of Attorney - Motor Vehicle Transactions

**SUBMISSION OF THIS FORM MUST BE ACCOMPANIED BY A COPY OF THE APPOINTED ATTORNEY-IN-FACT'S DRIVER'S LICENSE OR STATE ISSUED IDENTIFICATION.**

This form can be electronically completed and printed for signing and submission from the Department of Revenue website, [www.dor.ga.gov](http://www.dor.ga.gov). Except for signatures, this form may be typed, electronically completed and printed or printed legibly by-hand in blue or black ink. This form must be completed in its entirety, signed and notarized. **\*It is a felony for any person to willfully enter false information on this form.** The Department of Revenue or the County Tag Office reserves the right to verify all information contained on this document before it is accepted.

**NOTE:** You **cannot** use a "limited" power of attorney when the seller/transferor and the buyer/transferee on the title assignment are the **same** person **or** agents of the same company or corporation when there is a requirement to disclose the motor vehicle's odometer reading.

**PHOTOCOPIES ARE NOT ACCEPTABLE - ORIGINAL FORM MUST BE SUBMITTED. ANY ALTERATION OR CORRECTION VOIDS THIS FORM.**  
**PRIOR VERSIONS OF THIS FORM WILL NOT BE ACCEPTED AFTER 3/1/2015.**

### APPOINTMENT OF ATTORNEY-IN-FACT

I/We,

Appoint

As my/our attorney-in-fact, to represent me/us before the Georgia Department of Revenue or any of the County Tax Commissioners' offices in the state with respect to the following described vehicle:

Vehicle Identification Number (VIN):

Year:  Make:  Model:

Said attorney-in-fact is authorized to apply for an original or replacement certificate of title, to transfer title to said motor vehicle and to perform on my/our behalf any act or thing whatsoever concerning such motor vehicle in every aspect as I/we could do were I/we present.

This power-of-attorney revokes all earlier powers-of-attorney and shall be in full force and effect until written revocation is received by the Department of Revenue or Tax Commissioner, but in no event shall this power-of-attorney be valid beyond twelve (12) months from the date of its execution.

The undersigned owner(s) further certify that this power-of-attorney was completely filled in at the time of its execution.

Signed and attested this  day of ,

Owner(s) Full Legal Name(s):  Owner(s) Signature(s):   
Printed or Typed

Owner's Address:  Owner's Phone Number:

### ACKNOWLEDGEMENT OF NOTARY PUBLIC

The undersigned notary public does hereby certify that the above named owner of the vehicle identified in this appointment of an attorney-in-fact, executed this form in my presence and that said owner(s) was/were proven to be the person(s) named by the use of the following form of positive, picture identification **(a copy of the Owner(s) Driver's License must accompany this form if applying for an expedited title at the DOR Southmeadow location):**

Owner(s) Valid Driver's License Number:  Name(s) as listed on Driver's License:  Name(s) of Issuing State:

Sworn to and subscribed before me this  day of ,

Notary Public's Full Legal Name:  Notary Public's Signature:   
Printed or Typed

Notary Public's Address:  Notary Public Seal/Stamp:

Notary Public's Phone Number:

Date Notary Commission Expires: