CLAUDIA G. LAWSON

DeKalb County Tax Commissioner
4380 Memorial Drive Suite 100
Decatur, Georgia 30032
(404) 298-4000

www.co.dekalb.ga.us/taxcommissioner email: motorveh@co.dekalb.ga.us

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LIMITED POWER OF ATTORNEY FOR COMPLETING MOTOR VEHICLE TRANSACTIONS

IMPORTANT NOTICE: Under Georgia Law, it is a felony for any person to willfully enter false information on a title application. The Department of Revenue reserves the right to verify all information contained in this document prior to its acceptance. You cannot use a "limited" power of attorney when the seller/transferor and the buyer/transferee on the assignment of title are the same persons or agents of the same company or corporation.

Know all men by these present that_____of
(Name of Owner)
_____does hereby appoint
(Address)
_____
(Name & address of appointed attorney-in-fact – Only one attorney-in-fact may be appointed)
as attorney-in-fact to represent the undersigned before the State Revenue Department of Georgia with respect to the following described vehicle:
_____
(Year Model, Make of Vehicle, and Vehicle Identification Number)
Said attorney-in-fact is authorized by this power-of-attorney to apply for original or replacement certificates of title, to transfer title to said motor vehicle and to perform on behalf of said owner in furtherance thereof any act or thing whosoever concerning such motor vehicle in every respect as the owner could do were he personally present at the doing thereof.

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 commissioner but in no event shall this power-of-attorney be valid beyond six (6) months from the date of its execution.

The undersigned owner further certifies that this power-of-attorney was completely filled in at the time of its execution.
Signed this _____ day of _____, _____

_____	_____
(Typed name of owner)	**(Street address of owner)**
_____	_____
(Signature of owner)	**(City, state, zip code & telephone no. of owner)**

ACKNOWLEDGEMENT OF NOTARY PUBLIC

The undersigned notary public does hereby certify that the above named owner of the vehicle identification herein, executed this power-of-attorney in my presence and that said owner is personally known to me or was satisfactorily proven to be the person named herein by the use of the following form of positive identification: _____
(Driver's license number of owner and state of issue)
Subscribed before me this the _____ day of _____, _____

_____	_____
(Typed name of notary public or Magistrate)	**(Street address of notary public or Magistrate)**
_____	_____
(Signature of notary public or Magistrate)	**(City, State, Zip Code & Telephone # of N.P. or Magistrate)**