# MOTOR VEHICLE POWER OF ATTORNEY

**THIS DOCUMENT PRESENTS** that \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, (Company Name or Individual) with a mailing address of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Principal) grants to \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, with a mailing address of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Agent) 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 South Carolina.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Year** | **Make** | **Model** | **Style** | **Vin Number** | **Odometer** |

Ifthis Power of Attorney is in an *Individual’s Name*, include the following:

Date of Birth: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
Social Security Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If this Power of Attorney is in a *Company’s Name*, include the following:
Federal ID/EIN Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ .

**Principal’s Signature** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**NOTARY ACKNOWLEDGMENT**

STATE OF \_\_\_\_\_\_\_\_\_\_\_\_\_\_ )

COUNTY OF \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_) ss.

Before me personally appeared the above-named \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, (Name or Officer or Individual) 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)

#