## (TO BE TYPED ON DEALERSHIP LETTERHEAD)

## **POWER OF ATTORNEY**

The undersigned individual(s) do hereby appoint <u>(Dealer Representative Name (s))</u>, of <u>(Dealership</u> <u>Name)</u> to complete all documents necessary to transfer ownership of and/or register the vehicle described below:

Year	Make	Model	VIN	
Owner (P	rint Name)		Owner's Signature	
Address:				
	rint Name)		 Owner's Signature	
	·			
Address:				
Effective	Date:	_		
	New Jersey f			
Sworn ar	d subscribed before m	e this day of		20
			Notary Signature Notary Public, State of I My Commission Expires	-