

LIMITED POWER OF ATTORNEY FOR SALE OF MOTOR VEHICLE

To authorize another to sign bill of sale, title and other documents.

State of Rhode Island

County of _____

KNOW ALL PERSONS BY THESE PRESENTS, THAT I/We

_____, whose address is _____ (City), _____ (State), _____ (Zip), desiring to execute a LIMITED POWER OF ATTORNEY, hereby appoint, _____, of _____ County, Rhode Island, as my Attorney-in-Fact to act as follows, GRANTING unto my Attorney-in-Fact full power to:

Do all things necessary to sell or transfer the property described below, including, but limited to, execution of a bill of sale, title, odometer statement, request for release of liens, and other documents, and to receive all funds from the purchase of same.

Property is One (1) Motor Vehicle

Make	Model	Body Type
_____	_____	_____
Vehicle Identification Number (VIN) _____		Year: _____

I hereby ratify and confirm all that said attorney-in-fact shall lawfully do or cause to be done by virtue of this Power of Attorney and the rights and powers herein granted.

All acts done by means of this power shall be done in my name, and all instruments and documents executed by my Attorney hereunder shall contain my name, followed by that of my attorney and the description "Attorney-in-Fact", excepting however any situation where local practice differs from the procedure set forth herein, in that event local practice may be followed. This LIMITED POWER OF ATTORNEY shall be valid and may be relied upon by any third parties until such time as they receive notice of revocation of same.

WITNESS my signature this the ____ day of _____, 20__.

Signature

Signature

STATE OF RHODE ISLAND
COUNTY OF _____

In _____, in said County on the _____ day of _____, before me personally appeared _____, each and all to me known, and know by me to be the party(ies) executing the foregoing instrument; and _____ acknowledged said instrument, by him/her/they executed, to be his/her/their free act and deed.

Given under my hand this _____ day of _____, A. D. 20__.

NOTARY PUBLIC

My Commission Expires: _____