LIMITED POWER OF ATTORNEY FOR SALE OF MOTOR VEHICLE To authorize another to sign bill of sale, title and other documents. State of Connecticut 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, Connecticut as my Attorney is F County, Connecticut, 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 Model Body Type Make Year: Vehicle Identification Number (VIN) 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 ATTESTATION The hereinafter named Witnesses, each declare under penalty of perjury under the laws of the State of Connecticut, that the principal is personally known to us, that the principal signed and acknowledged this special power of attorney in our presence, that the principal appears to be of sound mind and under no duress, fraud or undue influence, that we are not the person appointed as attorney-in-fact by this document and that we witnessed this power of attorney in the presence of the principal. We are not related to the principal by blood, marriage or adoption, and to the best of our knowledge, are not entitled to any part of the estate of the principal upon the death of the principal under a will now existing or by operation of law. WITNESSES: SignaturePrint Name: Address:

City: State: Zip: SignaturePrint Name: WITNESSES: _____Address: ____ City: State:

STATE OF CONNECTICUT

COUNTY OF	
On this the day of,, before me,	nown
On this the day of,, before me,, to me (or satisfactorily proven) to be the person(s) whose name(s) (is or are) subscribed to the within instrument and acknowledged that (he/she/they) executed the same for the purposes the contained.	erein
In witness whereof I hereunto set my hand.	
Date:	
NOTARY PUBLIC My Commission Expires:	