

Account No.: \_\_\_\_\_

**LIMITED POWER OF ATTORNEY TO TRANSFER OWNERSHIP TO A MOTOR VEHICLE, AND TO DISCLOSE MILEAGE**

I (we), \_\_\_\_\_ irrevocably appoint \_\_\_\_\_  
(Print Sellers' Name(s)) (Print Name of Person Appointed)

as my(our) agent and attorney-in-fact, to (1) execute all documents necessary to transfer all my (our) right, title, and interest in the vehicle described as follows (the "Vehicle"):

Description: \_\_\_\_\_ Body Type: \_\_\_\_\_  
Vehicle Identification Number: \_\_\_\_\_

to GMAC; and (2) disclose the mileage on the title or other documents required by State or Federal Law for the Vehicle in a manner consistent with my(our) following disclosure:

I certify that the odometer now reads \_\_\_\_\_ (no tenths) miles and to the best of my knowledge that it reflects the actual mileage unless one of the following statements is checked.

- (1) I hereby certify that to the best of my knowledge the odometer reading reflects the mileage in excess of its mechanical limits.
- (2) I hereby certify that the odometer reading is NOT the actual mileage. WARNING – ODOMETER DISCREPENCY.

I understand that I am required by law to state the mileage upon transfer of ownership and that providing a false statement may result in fines and/or imprisonment.

\_\_\_\_\_  
(Signature of Seller) (Print Name) (Date of Statement)

\_\_\_\_\_  
(Signature of Seller) (Print Name) (Date of Statement)

\_\_\_\_\_  
(Seller's Street Address, City, State, Zip Code)

Acknowledgement of Notary Public

**The undersigned notary public does hereby certify that the above named owner of the vehicle identified in this appointment of an attorney-in-fact, executed this form in my presence and that said owner was proven to be the person named by the use of the following form of positive, picture identification:**

\_\_\_\_\_  
(Driver's license number of owner and state of issue)

Sworn to and subscribed before me:

This \_\_\_\_\_ Day of \_\_\_\_\_, \_\_\_\_\_  
(Month) (Year) (Printed/typed name of notary public)

\_\_\_\_\_  
(signature and seal or stamp of notary public) (Notary public's telephone # or e-mail address)

\_\_\_\_\_  
(Date commission expires) (Notary public's address)