



SHERRI AYLOR PCC
 TAX ASSESSOR-COLLECTOR
 Motor Vehicle Department

AUTHORIZATION LETTER

<u>Vehicle Information</u>		
Year: _____	Make: _____	Plate Number: _____
Vehicle Identification Number (VIN): _____		

I / We, _____, do hereby authorize the following representative: _____	
<small>(Representative must provide U.S. Government issued identification: Driver License, ID Card, etc.)</small>	
to complete the following transaction: <u>(Please INITIAL one or more)</u>	
_____ Purchase Registration	_____ Title Transfer
_____ Replacement Plates (if needed)	_____ Other: _____

_____ I also authorize my representative to use my credit card as payment <small>(The name on card must match the name on the vehicle record.)</small>

<u>Address Change</u>
I hereby state that I reside at: _____

I hereby state this vehicle (HAS) (HAS NOT) been operated since expiration. Has a ticket been issued for the expired registration? (YES) (NO)
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 Signature(s) of Registered Owner(s) _____
Date

Home: _____ Work: _____

*****Copy of owner's Driver's License must accompany Authorization Letter*****

Note – if vehicle is registered in a company name, attach a business card, along with the copy of Driver's License

900 S POLK ♦ Suite 106A ♦ AMARILLO, TX 79101
PO BOX 2289 ♦ AMARILLO, TX 79105
(806) 342-2630

WARNING: TRANSPORTATION CODE §501.155, PROVIDES THAT FALSIFYING INFORMATION ON ANY REQUIRED STATEMENT OR APPLICATION IS A THIRD - DEGREE FELONY.
