

**POWER OF ATTORNEY FOR LICENSED
NEW JERSEY MOTOR VEHICLE DEALERS
(for electronic signature only)**



NOTICE: This non-secure power of attorney form may be used to appoint an individual or dealer representative to conduct motor vehicle transactions on behalf of another individual. This form, may be used with a separate odometer disclosure statement (Form OS/SS-2) to disclose and acknowledge odometer reading when transferring ownership. This form cannot be used to allow an individual or entity to sign as both buyer and seller disclosing and acknowledging an odometer reading. Dealers may use a secure power of attorney (Form DLR-SPOA) to transfer ownership when the original certificate of title is either lost or held by a lienholder. **This form must be digitally completed, signed and submitted with Certificates of Completion issued by a NIST AAL2 compliant electronic signature vendor.**

I, _____, hereby appoint _____ OF
Grantor Name Dealer Representative
 _____, as my attorney-in-fact to sign my name to all applicable documentation relative to any
Name of Licensed Dealership
 title and/or registration transactions for the vehicle described below. I understand that these documents may contain the federally mandated odometer disclosure or acknowledgement and that I am responsible for making the disclosures or acknowledgements therein. The authority granted by this power of attorney is limited to the following vehicle, which I am purchasing:

Make: _____ Model: _____ VIN: _____ Year: _____

By signing below, I certify that the information on this form is true and correct. I am aware that submission of false information or the making of a false statement may subject me to penalty.

[buyer (grantor) signature]

[date]

[buyer printed name]

[co-buyer (grantor) signature]

[date]

[co-buyer printed name]

DEALER CERTIFICATION

I _____, employed by _____, New Jersey Dealer
Dealer Representative Name of Licensed Dealership
 License No. _____, certify that this power of attorney was electronically signed by the buyer(s) name above, using a secure authentication system and in accordance with minimum security requirements set forth by the National Highway Traffic Safety Administration under 49 CFR 580.1 et seq. for Authentication Assurance Level 2. I further certify that I am authorized to complete this form.

[Dealer Representative Signature]

[Title]

[Printed Name of Dealer Representative]

[Date]

Dealer must attach a single page Certificate of Completion for each digital signature.