



AUDITOR-TREASURER

Authorization to Purchase Vehicle Registration

***** Due to Data Privacy Laws, Registration cannot be sold to a non-owner without the following*****

I, _____ Authorize: _____
(Owner's Printed Name) (Name of Authorized Person)

To purchase my registration for the following motor vehicle:

Plate: _____ Year: _____ Make: _____ Last 4 of VIN: _____

County vehicle is kept in: _____

Insurance Company: _____

Policy Number: _____ Expiration Date (mm/dd/yy): _____

Owner's Signature: _____ Date: _____

Live signature is REQUIRED - Photocopies & faxes will not be accepted

Special statement of non-use:

This vehicle has not been used on public roads from _____ through _____
(mm/yy) (mm/yy)