



**POWER OF ATTORNEY FOR  
TOTAL LOSS VEHICLE  
(for electronic signature only)**



**NOTICE:** Federal law prohibits the use of this form to allow an individual or insurer representative to sign a mileage disclosure statement on behalf of both grantor (insured) and grantee (insurance company or insurer) where the vehicle is subject to federal mileage disclosure law. **This form must be digitally completed and signed.**

I/We, \_\_\_\_\_, residing at \_\_\_\_\_, owner(s) of the following vehicle:  
Grantor Name(s) Grantor's Residential Address

VIN: \_\_\_\_\_ Make: \_\_\_\_\_ Model: \_\_\_\_\_ Year: \_\_\_\_\_ do

hereby appoint \_\_\_\_\_ of \_\_\_\_\_, as  
Ins. Co. Representative Insurance Company Name

my/our attorney-in-fact to apply for a duplicate certificate of title, and to perform on my/our behalf any necessary act concerning the transfer of such motor vehicle as I/we could do were I/we present and permitted by this power of attorney.

**By signing below, I/we 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.**

\_\_\_\_\_  
[owner/grantor signature]

\_\_\_\_\_  
[date]

\_\_\_\_\_  
[owner/grantor printed name]

\_\_\_\_\_  
[co-owner/grantor signature]

\_\_\_\_\_  
[date]

\_\_\_\_\_  
[co-owner/grantor printed name]

**INSURER CERTIFICATION**

I, \_\_\_\_\_, employed by \_\_\_\_\_,  
Ins. Co. Representative Insurance Company Name.

certify that this Power of Attorney was electronically signed by the above-named vehicle owner(s), 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 Assurance Level 2. I further certify that I am authorized to complete this form.

\_\_\_\_\_  
[Ins. Co. representative signature]

\_\_\_\_\_  
[representative title]

\_\_\_\_\_  
[Printed Name of Ins. Co. Representative]

\_\_\_\_\_  
[date]

Insurer must attach a Certificate of Completion for each digital signature.