TENNESSEE DEPARTMENT OF REVENUE
Power of Attorney for Vehicle Transactions

RV-F1311401 (Rev. 2-21)

PURPOSE: To appoint an individual or entity to manage vehicle transactions on the behalf of another individual. (Tenn. Code Ann. § 34-6-101 and 102). Dealers must use a secure power of attorney (RV-F1316901) to transfer ownership when the original certificate of title is not available for the owner to make an odometer disclosure as required by The Motor Vehicle Information & Cost Savings Act of 1986; 49CFR580.

INSTRUCTIONS: Please complete the document below in its entirety. **NOTE:** This document is void if any information has been left blank or if any information entered hereon has been erased or altered by any means.

A. AFFIANT INFORMATION:

Date: _____

I, _____ , do hereby appoint _____
(Name) (Name of Attorney-in-fact Representative)

of _____
(Business or Title Service, if applicable) (Street Address)

_____ as my attorney-in-fact to sign my name
(City) (State) (Zip Code)

to all applicable documentation relative to any title or registration transactions for the vehicle described herein. I understand that these documents may contain the federally mandated odometer disclosure and that I am responsible for the disclosures made therein. This authority is limited to the vehicle listed below:

Make: _____ VIN: _____

Model: _____ Body Type: _____ Year: _____

Check the appropriate box for each transaction type authorized:

- ☐ Duplicate Title
- ☐ Noting of Lien
- ☐ Request for Verification of Ownership on Vehicles Found Abandoned, Immobile or Unattended
- ☐ Vehicle Information Request
- ☐ Application for Title and Registration
- ☐ Transfer of Title
- ☐ Other (Specify): _____

The area below is to be completed by the party granting authority:

☐ Individual ☐ Business:

_____ _____
Business Name (Printed Name of Individual or Business Owner)

_____
(Physical Street Address) (City) (State) (Zip Code)

_____
(Telephone Number) (Email Address)

B. ACKNOWLEDGMENT:

AFFIANT CERTIFICATION STATEMENT: I, the undersigned affiant, hereby certify that the statements made herein are true and correct to the best of my knowledge, information and belief. Fraudulent statements made in this application could result in denial of this request and subject the signatory to criminal and civil penalties.

Affiant's Signature: _____ Date: _____