LIMITED POWER OF ATTORNEY

| Date: | | | | | |
|-------------------------------------|----------|-----------------------------|-----------------------|---------------------|--|
| I/We | | , hereby name and | | | |
| appointact for me/us to apply for a | | | _ to be my/our law | ful attorney and to | |
| Year | Make_ | | | | |
| Vehicle Identification Num | oer | | | | |
| Print Owners Name | | X Signature of Owner | | Date | |
| Print Owners Name | | XSignature of Owner | | Date | |
| Address | | City/State | Zip | Telephone # | |
| The signature of | | | was subscribed and | sworn to | |
| before me at | | ,NH county of | | | |
| On this the | _ day of | of in the year of | | | |
| Seal: | | Notary/Justice of the Peace | | | |
| | | Signed Printed | | | |
| | | | My commission expires | | |

THIS FORM MUST BE NOTARIZED

Note: Please sign name(s) as they appear on the title.