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T-8W (Revised 06-2020)
Web and MV Manual

Georgia Department of Revenue - Motor Vehicle Division
Secure Power of Attorney

ANY CORRECTION OR ALTERATION WILL VOID THIS FORM

Purpose of this form: A seller may use this form when a vehicle is transferred to authorize a purchaser to disclose odometer mileage in lieu of the seller completing the odometer information on the proof of ownership.

How to submit this form: This form must be submitted by the person exercising Power(s) of Attorney to secure a Certificate of Title. Failure to do so may result in fines and/or imprisonment. Submit this form electronically along with required documents through the Department of Revenue - Motor Vehicle Division's Electronic Title and Registration (ETR) program.

Required document: Completed and signed Form MV-1 Tag/Title Application.

VEHICLE INFORMATION

Vehicle Identification No. (VIN):

Year: **Make:** **Model:** **Body Type:**

A POWER OF ATTORNEY TO DISCLOSE MILEAGE

Federal and State laws require that you state the mileage upon transfer of ownership.
Failure to complete or providing a false statement may result in fines and imprisonment.

I, Transferor's/Seller's Name **, appoint** Transferee's/Buyer's Name
as my attorney-in-fact, to sign all papers and documents required to secure a Georgia Title and to disclose the mileage on the title for the vehicle described above, exactly as stated in my following disclosure.

I, the transferor/seller, state that the odometer now reads 000,000 **(no tenths) miles and, to the best of my knowledge, that it reflects the actual mileage unless one of the following statements is checked.**

[ ] The mileage stated is in excess of odometer's mechanical limits. [ ] The odometer reading is NOT the actual mileage. WARNING – ODOMETER DISCREPANCY

Transferor's/ Seller's Name:
Street Address: Street No. Street Name Apt./Suite No.
City: **State:** **ZIP Code:**
Signature of Transferor/Seller: Date

Transferee's/ Buyer's Name:
Street Address: Street No. Street Name Apt./Suite No.
City: **State:** **ZIP Code:**
Signature of Transferee/Buyer: Date

B POWER OF ATTORNEY TO REVIEW TITLE DOCUMENTS AND ACKNOWLEDGE DISCLOSURE (Part B is invalid unless Part A has been completed)

Federal and State laws require that you state the mileage upon transfer of ownership.
Failure to complete or providing a false statement may result in fines and imprisonment.

I, Printed Name **, appoint** Printed Name
as my attorney-in-fact, to sign all papers and documents required to secure a Georgia Title and to sign the mileage disclosure on the title for the vehicle described above, only if the disclosure is exactly as the disclosure completed below.

I, Printed Name **, state that the odometer now reads** 000,000 **(no tenths) miles and, to the best of my knowledge, that it reflects the actual mileage unless one of the following statements is checked.**

[ ] The mileage stated is in excess of odometer's mechanical limits. [ ] The odometer reading is NOT the actual mileage. WARNING – ODOMETER DISCREPANCY

Transferor's/ Dealer's Name:
Street Address: Street No. Street Name Apt./Suite No.
City: **State:** **ZIP Code:**
Signature of Transferor/Dealer: Date

Transferee's/ Buyer's Name:
Street Address: Street No. Street Name Apt./Suite No.
City: **State:** **ZIP Code:**
Signature of Transferee/Buyer: Date

C CERTIFICATION (To be completed ONLY after Parts A and B or Part A ONLY have been completed)

I, Name of Person Exercising Power of Attorney for Dealer **, hereby certify that the mileage I have disclosed on the title document is consistent with that provided to me in the above power of attorney. Further, upon examination of the title and any reassignment documents for the vehicle described above, the mileage disclosure I have made on the title pursuant to the power of attorney is greater than that previously stated on the title and reassignment document. This certification is not intended to create any new or additional liability under Federal or State law.**

Dealer's Name: (As shown in Part A)
Street Address: Street No. Street Name Apt./Suite No. **City:** **State:** **ZIP Code:**
Signature of Person Exercising Power of Attorney: **Date:**

Have a question? Visit our website at https://dor.georgia.gov/motor-vehicles or scan the QR code above for more information.