



Georgia Department of Revenue - Motor Vehicle Division Affidavit of Authority to Sign for a Company, Corporation or Partnership



ANY CORRECTION OR ALTERATION WILL VOID THIS FORM

The Georgia Department of Revenue - Motor Vehicle Division retains this affidavit for two (2) years from the date received.

Purpose of this affidavit: This affidavit is to certify an individual's authority to execute title documents on behalf of a company, corporation or partnership ("Business Entity").

Completing this affidavit: This affidavit must be completed in its entirety, legibly printed in blue or black ink or typed.

Section A: Record the Business Entity's name, street address, e-mail address and telephone number. Provide the legal name of the individual granted authority to sign for the Business Entity.

Section B: Certify before a commissioned notary that all statements are true and accurate.

Section C: The commissioned notary public must complete this affidavit with the sworn and subscribed date, their full legal name, physical address, e-mail address, telephone number, signature, commission expiration date and notary seal or stamp.

How to submit this affidavit: The individual granted authority to sign for the Business Entity must submit two (2) completed, original affidavits along with all required documents to the Georgia Department of Revenue - Motor Vehicle Division, Customer Service Operations Section. Please **drop off documents** in the MVD Drop-Off Box located at 4125 Welcome All Road, Atlanta, Georgia 30349 **or mail documents** to Attn: Customer Service Operations, DOR/Motor Vehicle Division, P.O. Box 740382, Atlanta, Georgia 30374-0382.

Required documents: A copy of the authorized individual's driver's license is required upon initial receipt of this affidavit.

General information: The Motor Vehicle Division will return to the individual one (1) original, stamped affidavit, which indicates that it is in our files and valid for two (2) years from the date received. The authorized individual must submit a legible copy of the stamped affidavit with each set of title documents submitted for processing on behalf of the Business Entity.

A	BUSINESS ENTITY (COMPANY, CORPORATION OR PARTNERSHIP) INFORMATION										
Business Entity's Name: <input style="width: 90%; height: 25px;" type="text"/>											
Street Address: <table style="width:100%; border: none;"> <tr> <td style="border: none; width: 15%;"><small>Street No.</small></td> <td style="border: none; width: 40%;"><small>Street Name</small></td> <td style="border: none; width: 15%;"><small>Apt./Suite No.</small></td> <td style="border: none; width: 15%;"><small>City</small></td> <td style="border: none; width: 10%;"><small>State</small></td> <td style="border: none; width: 5%;"><small>ZIP Code</small></td> </tr> </table> <input style="width: 90%; height: 25px;" type="text"/>						<small>Street No.</small>	<small>Street Name</small>	<small>Apt./Suite No.</small>	<small>City</small>	<small>State</small>	<small>ZIP Code</small>
<small>Street No.</small>	<small>Street Name</small>	<small>Apt./Suite No.</small>	<small>City</small>	<small>State</small>	<small>ZIP Code</small>						
E-mail Address: <input style="width: 80%; height: 25px;" type="text"/>				Telephone No.: <input style="width: 15%; height: 25px;" type="text"/>							
Printed Name of Individual Granted Authority to Sign for Business Entity: <input style="width: 90%; height: 25px;" type="text"/>											
B	CERTIFICATION										
On behalf of the Business Entity named above, I hereby certify that the individual identified in this affidavit has the authority to execute title documents on behalf of the company, corporation or partnership.											
Officer's, Partner's or Owner's Printed Name: <input style="width: 90%; height: 25px;" type="text"/>											
Officer's, Partner's or Owner's Signature: <input style="width: 80%; height: 25px;" type="text"/>				Date: <input style="width: 10%; height: 25px;" type="text"/> / <input style="width: 10%; height: 25px;" type="text"/> / <input style="width: 10%; height: 25px;" type="text"/>							
C	NOTARY PUBLIC ACKNOWLEDGEMENT										
Sworn to and subscribed before me this <input style="width: 30px; height: 25px;" type="text"/> day of <input style="width: 150px; height: 25px;" type="text"/> <small>Month</small> , <input style="width: 50px; height: 25px;" type="text"/> <small>Year</small>											
Notary Seal or Stamp											
Notary Public's Full Legal Name: <input style="width: 90%; height: 25px;" type="text"/>											
Physical Address: <input style="width: 90%; height: 25px;" type="text"/>											
E-mail Address: <input style="width: 80%; height: 25px;" type="text"/>				Telephone No.: <input style="width: 15%; height: 25px;" type="text"/>							
Signature of Notary Public: <input style="width: 80%; height: 25px;" type="text"/>				Commission Expires: <input style="width: 15%; height: 25px;" type="text"/>							