

OHIO DEPARTMENT OF PUBLIC SAFETY **BUREAU OF MOTOR VEHICLES**

POWER OF ATTORNEY FOR OHIO VEHICLE REGISTRATION

TO BE COMPLETED BY THE OWNER OR PURCHASER OF VEHICLE(S) LISTED BELOW

I, of										hereby	
Print Full Name of Vehicle Owner Print								ddress of Vehicle	Owner	•	
appoint of											
Print Full Name of Person Granted Authority Print Address of Person Granted Authority											
to make application, in my stead, for registration or transfer of registration for the following vehicle(s):											
PLATE NUMBER	VEH. YEAR		MAKE	TYPE		COLOR		SERIAL NUMBER			
VEHICLE OWNER DATE OF VEHI		L CLE OWNER OH DL# /	/ OH ID# VEH			LE OWNER SSN (IF		VEHICLE OWNER EIN / TIN			
BIRTH VEHICLE OWNER BATE OF			CLE OWNER OH DL# /	DL / OH ID)			VINLIX	VEHICLE OWNER EIN / TIN			
FOR BMV USE ONLY / CLERK VERIFICATION OF VEHICLE OWNER						LIST DOCUMENT W / SSN VEHICLE OWNER PRESENTED					
OH DL / OH ID / MATCH IF NO OH DL / OH ID, PROOF OF SSN REQUIRED										WNER PRESENTED	
IN THE CASE OF A LEASE OR JOINT OWNERSHIP, YOU WILL BE REQUIRED TO PROVIDE THE LESSEE / ADDITIONAL OWNER'S OHIO											
DRIVER LICENSE NUMBER (DL), OHIO ID CARD NUMBER (ID), SOCIAL SECURITY NUMBER (SSN), TAX IDENTIFICATION NUMBER (EIN / TIN).											
LESSEE / ADDITIONAL VEHICLE OWNER NAME							LESSEE / ADDITIONAL VEHICLE OWNER OH DL# / OH ID#				
							(SSN IF NO OH DL / ID)				
LESSEE / ADDITIONAL VEHICLE OWNER ADDRESS							LESSEE / ADDITIONAL VEHICLE OWNER EIN / TIN				
FOR BMV USE ONLY / CLERK VERIFICATION OF LESSEE							LIST DOCUMENT W / SSN LESSEE PRESENTED				
OH DL / OH ID / MATCH IF NO OH DL / OH ID, PROOF OF SSN REQUIRED											
IDENTIFICATION OF PERSON GRANTED AUTHORITY (PGA)											
PGA U.S. / CANADIAN DL# / ID#								PGA SSN (IF NO U.S. / CANADIAN DL / ID IS AVAILABLE)			
FOR BMV USE ONLY / CLERK VERIFICATION OF PERSON GRANTED AUTHORITY							CLERK'S INITIALS				
U.S. / CANADIAN DL / ID (PGA can present U.S. or Canadian DL / ID)							I certify I have reviewed documents to verify DL / ID or SSN.				
SSN VIA ACCEPTABLE DOCUMENT							X				
I acknowledge that I (we), the owner(s), or lessee(s) of leased vehicle now have insurance or other financial responsibility coverage covering this vehicle											
and I (we) will not operate or permit the operation of this vehicle without FR coverage, and that the vehicle will not be used as a commercial vehicle unless so registered. I understand and acknowledge that making false statements on this document is illegal and may subject me to criminal penalties.											
Licensed Ohio Motor Vehicle Dealers- Digital Signature - the Motor Vehicle Dealer listed is responsible for maintaining authenticated and											
accurate copies of all documents, including but not limited to, records related to digital signatures and may be required to provide evidence of											
document authenticity upon request.											
E-MAIL ADDRESS						COUN	COUNTY OF RESIDENCE CITY OR TOWNSHIP OF RESIDENCE				
TELEPHONE NUMBER SIGNATURE OF OWNER(S)							DATE				
		X									
FOR LIST OF ACC	EPTABLE	DOCU	MENTS, GO TO WWW.	BMV.OHI	0.G0	V ACCE	PTABI	LE DOCUMENTS	LIST: FORM BM	IV 2424 / BMV 2430	
VOLUMELL LOSS VOLUB DRIVER LIGENSE IS VOLUBRIVE MITHOUT INCURANCE OR OTHER ACCEPTABLE SINANCIAL RESPONDIBILITY COVERAGE											

- In Ohio, it is illegal to drive any motor vehicle without insurance or other financial responsibility (FR) coverage.
- It is also illegal for any motor vehicle owner to allow anyone else to drive the owner's vehicle without FR coverage.
- PROOF OF COVERAGE IS REQUIRED: Whenever a police officer issues a traffic ticket At all vehicle inspection stops Upon traffic court appearances.
- ANY DRIVER OR OWNER WHO FAILS TO SHOW PROOF OF INSURANCE OR OTHER COVERAGE WILL: Lose his or her driver license until requirements are met on first offense, ONE YEAR on second offense and TWO YEARS on additional offenses • Pay reinstatement fees of \$40.00 for first offense, \$300.00 for second offense, \$600.00 for third and subsequent offenses • Be required to maintain special FR coverage (SR-22) on file with the Bureau of Motor Vehicles (BMV) for ONE YEAR.
- IF YOU ARE INVOLVED IN AN ACCIDENT WITHOUT INSURANCE OR OTHER FR COVERAGE: In addition to all the penalties listed above, you may have A SECURITY SUSPENSION for TWO YEARS or more and • A JUDGMENT SUSPENSION INDEFINITELY (until all damages have been satisfied).
- THESE PENALTIES ARE IN ADDITION TO ANY FINES OR PENALTIES IMPOSED BY A COURT OF LAW.
- WARNING: THESE LAWS DO NOT PREVENT THE POSSIBILITY THAT YOU MAY BE INVOLVED IN AN ACCIDENT WITH A PERSON WHO HAS NO INSURANCE OR OTHER
- WHEN REQUIRED, PROOF OF COVERAGE MAY BE SHOWN BY ANY OF THE FOLLOWING: AN INSURANCE POLICY showing automobile liability insurance of at least \$25,000 bodily injury per person, \$50,000 injury two or more persons, and \$25,000 property damage • AN INSURANCE IDENTIFICATION CARD (same coverage) • A SURETY BOND OF \$30,000 issued by any authorized surety company or insurance company • A BMV BOND SECURED BY REAL ESTATE having equity of at least \$60,000 • A BMV CERTIFICATE FOR MONEY in the amount of \$30,000 on deposit with the Registrar of Motor Vehicles • A BMV CERTIFICATE OF SELF-INSURANCE, available only to companies or persons who own at

DETACH BOTTOM PORTION FOR YOUR RECORDS __↑__THIS COMPLETED FORM MUST BE ATTACHED TO THE BMV APPLICATION ____

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