



Authorization for Vehicle Services

Protected A (when completed)

This information is being collected for the purposes of motor vehicle records in accordance with the *Traffic Safety Act*. Questions about the collection of this information can be directed to the Freedom of Information and Protection of Privacy Coordinator for the Alberta Government, Box 3140, Edmonton, Alberta T5J 2G7 780-427-7013.

| Owner/Lessee/Registrant Information and | Authorization | |
|---|--|---|
| NOTE: Authorized individual must have an AB driv | ver's licence or ID Card and present it for th | le service to be completed. |
| I/We, | | , |
| Print Name of Owner/Lessee/Registrant | | Driver's Licence Number or MVID |
| and | | , |
| Print Name of Owner/Lessee/Registrant | | Driver's Licence Number or MVID |
| give consent to | | , |
| Print Name of Authorized Individual or Organization | | AB Driver's Licence Number or MVID |
| to act on my/our behalf to process the service(s) in | | |
| Service(s) Required - Check all that apply | · | e type must be completed) |
| New Registration (Sections 1 and 2) | Renew Registration (Section 1) | |
| Transfer Plate to a New Vehicle (Section 1) | ☐ Plate Exchange on Current Registration (Section 1) | |
| Reprint Registration Certificate (Section 1) | Personalized/Specialty Plate Order/Reorder (Section 1) | |
| Cancel Plate/Registration (Section 1) | Parking Placard (Application/Exchange/Renew/Cancel) (Section 1) | |
| Transfer Personalized Plate Ownership (Section 1 and 2) | Modify Registration as detailed bel | ow (Section 1) |
| | | |
| Section 1 - Vehicle/Plate/Registration Infor | mation | |
| Licence Plate/Parking Placard Number (if applicable) | Vehicle Make Ve | ehicle Model Year |
| Vehicle Identification Number (VIN) | | |
| Section 2 - Additional Registration Particu | lars | |
| Register vehicle in my/our name(s) exactly as shown on our proof of ownership document | OR Register the vehicle in the nam (a proof of ownership documen | e(s) as shown below: it is still required) |
| Print Individual/Organization Name | | MVID |
| | | |
| Print Individual/Organization Name | | MVID |
| | | |
| Signatures | | |
| *Signatures of all applicable owners/lessees/regist | trants are required. If more names/signature | es are required, please use back of form. |
| Signature of Owner/Lessee/Registrant | Signature of Owner/Lessee/Re | egistrant Date yyyy-mm-dd |
| For Registry Agent Use Only | | |
| I confirm that I have reviewed the authorized indivi Driver's Licence/ID Card of the authorized individu | | |
| Signature of Registry Agent | <u> </u> | |