

# Total Loss Claim: Power of Attorney for Single Owner

More Than Just Insurance.

**Plymouth Rock**  
assurance®

**Plymouth Rock Management Company of New Jersey**

Teachers Auto Insurance Company of New Jersey  
Palisades Safety and Insurance Association  
Palisades Insurance Company  
Palisades Property and Casualty Insurance Company  
High Point Preferred Insurance Company  
High Point Safety and Insurance Company  
High Point Property and Casualty Insurance Company

## Power of Attorney ~ Bill of Sale

ANY PERSON WHO KNOWINGLY FILES A STATEMENT OF CLAIM CONTAINING ANY FALSE OR MISLEADING INFORMATION IS SUBJECT TO CRIMINAL AND CIVIL PENALTIES.

Claim Number: \_\_\_\_\_ Date of incident or Theft: \_\_\_\_\_

**This section will be pre filled when you receive the form.**

VEHICLE YEAR, MAKE, AND MODEL: \_\_\_\_\_

VIN: \_\_\_\_\_ VEHICLE LICENSE NUMBER AND STATE: \_\_\_\_\_

KNOW ALL PERSONS BY THESE PRESENT, THAT I/WE, THE UNDERSIGNED, for value received, on this \_\_\_\_\_ day of \_\_\_\_\_ in the year \_\_\_\_\_ grant, bargain, sell and assign all rights, title, and interest in and to the motor vehicle described above and do hereby make, create and appoint \_\_\_\_\_ of Plymouth Rock Group of Companies my/our true and lawful attorney in fact for me/us and my/our name(s) to execute and to sign my/our name(s) to assignment of titles, transfer of title, application for titles, copy of titles in my/our name(s) of the above motor vehicle.

**Do NOT complete ANYTHING in this section.**

This Power of Attorney shall remain in effect until such time as the title to this motor vehicle is out of my/our name(s), hereby satisfying and confirming all that the said attorney or substitutes shall do therein by virtue of these present.

SELLER/OWNER: **Sign Here**  
Signature \_\_\_\_\_ Printed Name \_\_\_\_\_ Date \_\_\_\_\_  
CO-OWNER: **DO NOT SIGN HERE**  
(if any) Signature \_\_\_\_\_ Printed Name \_\_\_\_\_ Date \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY/STATE: \_\_\_\_\_

**This section to be completed by a notary public**

Witness: \_\_\_\_\_ hand and seal this \_\_\_\_\_ day of \_\_\_\_\_

**Please complete the name and address section ONLY.  
Please sign and print the name of owner, EXACTLY as it appears on the title.  
Please have notarized where Notary is shown.**

More Than Just Insurance.

**Plymouth Rock**  
assurance®