



### Motor Vehicle Title Service Runner Authorization Form

Please complete this printable form online or write legibly in blue or black ink **ONLY**, within the lines provided. This form will **NOT** be accepted and will be returned if it is illegible, altered or incomplete.

Company Name: \_\_\_\_\_

*The following individual(s) is (are) authorized to act as runners for this company:*

Name	Driver's License Number
1.	
2.	
3.	
4.	
5.	
6.	
7.	
8.	
9.	
10.	
11.	
12.	
13.	
14.	
15.	
16.	

Signature of Owner: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Printed Name of Owner: \_\_\_\_\_

Date: \_\_\_\_\_