



**DEPARTMENT OF MOTOR VEHICLES**  
**Specimen Sheet**

*(To be submitted in hardcopy to the DMV)*

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

Name of Owner(s): \_\_\_\_\_

Company Stamp **OR** Seal (*affix stamp/seal in space below*)

*Authorised Person(s)*

\_\_\_\_\_  
NAME

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
NAME

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
NAME

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
NAME

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
NAME

\_\_\_\_\_  
SIGNATURE

I           Owner's Name           hereby authorise the abovenamed person(s) to conduct the business of motor vehicle registrations and transfers only, at the Department of Motor Vehicles, on behalf of           Name of Company          .

\_\_\_\_\_  
Signature

\_\_\_\_\_  
DD/MM/YYYY

Date

\_\_\_\_\_  
Title of Position