

Release of Interest/Power of Attorney

Vehicle license plate/Vessel registration number		Vehicle Identification or Hull Identification number (VIN or HIN)	
Year	Make	Series/Body type	Title number

Lienholder's release of interest—Requires notarization/certification, *unless a business entity and release is submitted with Certificate of Ownership*. Must be accompanied by Certificate of Ownership or completed, notarized/certified, **Affidavit of Loss of Title form TD-420-040**.

I/We release all interest in the above described vehicle/vessel.

_____ TYPE or PRINT lienholder/business/company name	_____ Title for business/company	X _____ Signature of person releasing interest
_____ TYPE or PRINT lienholder/business/company name	_____ Title for business/company	X _____ Signature of person releasing interest

Registered owner's release of interest—Requires notarization/certification (*even if notarized below*)

I/We release all interest in the above described vehicle/vessel.

_____ TYPE or PRINT registered owner name	X _____ Signature of registered owner
_____ TYPE or PRINT registered owner name	X _____ Signature of registered owner

Notarization/Certification

State of _____, County of _____

Signed or attested before me on _____ by _____

(Seal or stamp)

Signature

Printed or stamped name

Title _____ and _____
Dealer or county/office number or notary expiration date

Power of Attorney—Requires notarization/certification (*even if notarized above*)

To: Title and Registration Services
Department of Licensing
Olympia, Washington
And to whom it may concern

I appoint _____ to act as my attorney-in-fact to sign all papers and documents that may be necessary in order to secure, or release, Washington title and/or registration for the vehicle/vessel described above. I agree to guarantee and save the state of Washington, and the Director of Licensing, from all responsibility for any legal action which might arise from the issuance of a Washington certificate of title and/or registration for this vehicle/vessel.

_____ TYPE or PRINT name of person granting Power of Attorney	_____ Driver license or ID card number	X _____ Signature of person granting Power of Attorney
_____ TYPE or PRINT name of person granting Power of Attorney	_____ Driver license or ID card number	X _____ Signature of person granting Power of Attorney

Notarization/Certification

State of _____, County of _____

Signed or attested before me on _____ by _____

(Seal or stamp)

Signature

Printed or stamped name

Title _____ and _____
Dealer or county/office number or notary expiration date