

**SPECIAL POWER OF ATTORNEY-
SALVAGE AND SALVAGE PARTS ONLY**

A-90 NEW 12-2021

STATE OF CONNECTICUT
DEPARTMENT OF MOTOR VEHICLES
60 STATE STREET, WETHERSFIELD, CT 06161



INSTRUCTIONS: In accordance with Section 39 of Public Act 21-106, this form below may only be used as a Special Power of Attorney to authorize an insurance company or its agent, to make, complete, and/or sign an application for a motor vehicle registration and/or certificate of title, or other written document, form, or application that is required to be filed with the Department of Motor Vehicles (DMV). This Special Power of Attorney may only be used in connection with a transaction involving the motor vehicle registration, or certificate of title, for the motor vehicle identified below for which the insured has either received, or will receive, a total loss settlement for damage or theft from the insurance company.

Please note the following:

1. This Special Power of Attorney shall be completed in its entirety and shall bear the wet, or electronic signature of the Insured, as the Principal.
2. This Special Power of Attorney **does not** authorize your Agent to perform transactions related to your motor vehicle operator's license, identification card, or other transaction(s) that are unrelated to a motor vehicle registration or title.
3. This Special Power of Attorney shall be provided to the DMV representative at the time of service, or it shall be mailed into the DMV with the Application for a Motor Vehicle Registration and/or Certificate of Title.
4. This Special Power of Attorney shall include the year, make, model, and vehicle identification number for the motor vehicle in the area provided below.

KNOW ALL PERSONS BY THESE PRESENTS, which are intended to constitute a Special Power of Attorney, that I,

_____ , hereby appoint

(Print full name of the Principal/Insured)

_____ , as my attorney-in-fact

(Print the full name of your Agent)

to act in my name, place, and stead, in any way which I myself could do, as if I were personally present, to the full extent permitted by law, to act as an agent, to make, to complete, and to execute any application, or other written document, or form that is required to be filed with the Department of Motor Vehicles in connection with the motor vehicle registration, or certificate of title to the motor vehicle identified below for which I either received, or will receive, as compensation for the total loss settlement, for damage or theft, from my insurance company. This Special Power of Attorney is only valid and being granted for the express purposes stated herein, and may not be used for any other transaction(s) involving any other person or party.

YEAR	MAKE	MODEL	VEHICLE IDENTIFICATION NUMBER (VIN)

I am hereunto signing my name below on this _____ day of _____, 20_____.

Principal/Insured: _____

(Please sign your name, in the same manner, as printed above)

If signing with an electronic signature, I agree that the electronic signature shall have the same legal effect, validity, and enforceability, as a wet signature to the fullest extent permitted by Connecticut General Statute, Section 1-272.