



Consignment Order

LOT #:

Name: _____

Address: _____

Email: _____

Phone: _____

Year:
Make:
Model:
Mileage: TMU / ACTUAL
VIN:
Light Code RED GREEN Reserve: \$

START Y N

RUN Y N

DRIVE Y N

STOP Y N

BODY: DAMAGE FREE Y N

CURRENT INSPECTION Y N

OTHER NOTES _____

**TITLE: AVAIL DELAY
 NONE BRANDED**

Vehicle Consignment and Limited Power of Attorney

This form authorizes the Thomas Hirchak Company to sell and process all necessary paperwork to transfer title to the vehicle or other item listed above.

Payment for consignments sold will be made within 5 business days or when consignment is paid for in full, whichever is later. Commission per schedule A.

I commission to Thomas Hirchak Company to sell the items listed above to the highest bidder at public auction unless a reserve is entered above. I certify that I am the owner or authorized seller of the above listed item(s) and have good title and the right to sell and that they are free from all encumbrances except as listed. I agree to accept all responsibility for providing merchantable title and for delivery of title to purchaser.

Thomas Hirchak Company does not assume responsibility for theft or vandalism. The owner must make claim to their own insurance company. All vehicles are left at your own risk. I agree to hold harmless the Thomas Hirchak Company against any claims of the nature referred to in this agreement. I agree to the Fee Schedule and Terms of Consignment.

Seller agrees that if he/she consigns a vehicle Green or Yellow light and it is determined that the frame and/or and transmission will not pass inspection under the terms of the Green & Yellow light system, the seller guarantees that he/she will buy back the vehicle along with a \$200.00 buy back penalty including forfeiture of the selling fee. CAUTION: Please make 100% sure your vehicle's frame and transmission will pass inspection.

Undisclosed defects (slipping transmission, faulty power steering, failed brakes, etc) discovered while handling your vehicle will be noted in the catalogue. ***THIS INFORMATION IS ACCURATE TO THE BEST OF MY BELIEF.***

Authorized Signature: _____

Date _____

All signatures must be original and in ink; no photocopies or scanned forms.
All fields must be completed, or the form will not be accepted.

Vehicle Information

Make	Model	Model Year	Body Type	Color
Serial Number (VIN)			License Plate Number	License Plate State

Agent (Person Being Appointed to Act for Owner)

Name of Agent THOMAS HIRCHAK COMPANY		License Number	License State of Issue	
Mailing Address 298 JAMES BROWN DR		City WILLISTON	State VT	Zip 05495
Agent Signature	Phone Number (802) 878-9200	Email Address AUTOINFO@THCAUCTION.COM		

The following person hereby appoints the above-named as my attorney-in-fact to sign any documents for the vehicle described above, including but not limited to Vehicle Purchase, Vehicle Sale, Application for Title and/or Registration, and Transfer of Ownership

Vehicle Owner

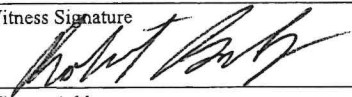
Printed Name of Owner / Company Agent		License Number	License State of Issue	
Company Name (if applicable)				
Mailing Address		City	State	Zip

I hereby affirm, under penalty of perjury, that the information on this form is true to the best of my knowledge. I further attest that I signed this Power of Attorney appointing my agent before a witness and notary. This declaration was made under penalties of 23 VSA § 202, § 203, §2082 & § 2083.

Signature of Owner / Company Agent (Sign in the presence of Notary and Witness. Signature must be of the applicant.)		Date
Phone Number		Email Address

Witness A person named as agent under the document may not serve as a witness or notary public with respect to the document.

I declare that the vehicle owner appeared of sound mind and free from duress at the time the Power of Attorney was signed and that the vehicle owner confirmed that he or she was aware of the nature of the document and signed it freely and voluntarily.

Witness Signature 	Witness Printed Name ROBERT BERKEY	Date
Witness Address 298 JAMES BROWN DRIVE	Witness Phone Number (802) 878-9200	

Notary (A person named as agent under the document may not serve as a witness or notary public with respect to the document)

<p>_____ personally appeared before me and satisfied me that they are the person named in and who signed this Release Form. Thereupon they acknowledged signing this Release Form as their act and deed for the uses and purposes expressed in this document.</p>				<p>Notary Seal</p>
Printed Name of Notary		Notary Signature		
Commission Number	Commission Expires	Notary Phone Number	Customer ID Verified <input type="checkbox"/> Yes <input type="checkbox"/> No	