



Barrhead Agency
Box 4248
Barrhead, AB T7N 1A3
Ph: (780) 674-8859
Fax: (780) 674-8869

Letter of Authority – Vehicle Registration

TO WHOM IT MAY CONCERN:

I, _____, authorize _____
(Print your name) (Print name of person representing you)

To Register / Transfer / Renew / Cancel the following vehicle,

_____ (Year) _____ (Make) _____ (Model)

With the serial number

To be registered

___ In the name of Pembina Hills Regional Division No. 7 ONLY.

License plate # _____ (Transfer/Renew/Cancel)

Signature of person giving consent

Date signed

Type of Identification Provided

Identification Number

NOTE: Must be signed by Pembina Hills Regional Division No. 7 or ADLC signing authority