



# Nevada Taxicab Authority

## State of Nevada - Business and Industry

2090 E. Flamingo Road Suite 200  
Las Vegas, Nevada 89119  
Telephone (702) 668-4000 • Fax (702) 668-4001  
<http://taxi.nv.gov>

### POWER OF ATTORNEY

Date: \_\_\_\_\_

RE: Vehicle Impound Hearing

Impound Number: \_\_\_\_\_ Event Number: \_\_\_\_\_

Vehicle Make/Model/Year: \_\_\_\_\_

VIN#: \_\_\_\_\_

I, \_\_\_\_\_ am the legal and/or registered owner of the above impounded vehicle.

I hereby authorize \_\_\_\_\_ to act on my behalf in the scheduled vehicle impound hearing.

Please allow \_\_\_\_\_ to speak and give any information and/or documentation needed, and to negotiate a fine should that issue arise to resolve this matter.

I further acknowledge \_\_\_\_\_ has my consent to represent me in regard to the release of the impounded vehicle.

**I HEREBY CERTIFY THAT THERE ARE NO WILLFUL MISPRESENTATIONS, OMISSIONS, OR FALSIFICATIONS IN THE FOREGOING STATEMENT.**

Dated this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_.

\_\_\_\_\_  
Registered Owner of Vehicle (Signature)

\_\_\_\_\_  
Full Name (Printed)

XXX-XX-\_\_\_\_\_  
Social Security Number (Last Four)

\_\_\_\_\_  
Date of Birth

STATE OF NEVADA )  
                                  )  
County of Clark )

Subscribed and Sworn before me this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_.

\_\_\_\_\_  
Signature of Notary