

R#

SHOP NAME AND INFO

DESIGNATED REPRESENTATIVE AUTHORIZATION  
FOR A COLLISION LOSS

DATE \_\_\_\_\_

I, \_\_\_\_\_ OWNER OF A

\_\_\_\_\_  
YEAR MAKE MODEL

LICENSE # \_\_\_\_\_ APPOINT \_\_\_\_\_  
NAME

AS MY DESIGNATED REPRESENTATIVE, AS PROVIDED FOR IN REGULATION 64 OF THE  
INSURANCE DEPARTMENT, STATE OF NEW YORK, ONLY AS TO MY MOTOR VEHICLE  
DAMAGE.

THIS IS NOT AN AUTHORIZATION TO REPAIR

\_\_\_\_\_  
SIGNATURE