

STAAB AGENCY

Shirley St. Pierre / Statutory Agent
P. O. Box 942 / 259 Goose Hill Road
Jefferson, Me 04348
800-648-8805 Fax 207-549-7638 email info@staabagency.com

SALES TAX DUE ON SMALLER TRAILER

(Utility, Lawn, Snowmobile, Boat trailers anything that is **under 3000lbs net weight**)

We will need the following information:

Prior registration and title

1. Year ____ make _____ model _____ serial number _____
2. Seller's name: _____
3. Date of transfer: ____/____/____
4. Seller's address: _____
5. Full purchase price \$ _____
6. Allowance for trade-in: \$ _____
7. Amount subject to tax (line 5 minus line 6) \$ _____
8. Use tax due (multiply line 7 by 5.5%) \$ _____
9. Need purchaser name: _____
10. Purchaser's social security or EIN #: _____
11. Purchaser's address: _____
12. Purchaser's phone #: _____

Tax due on non-commerce trailers and any trailer that is used less than 80% out of your state. If a use tax has been paid of the equivalent amount in another state then there is no tax due however if less than that amount was paid the difference is due. If the trailer was registered in another state for more than 12 months there will be no tax due, proof will be required.

LIMITED POWER OF ATTORNEY

KNOW ALL MEN BY THESE PRESENTS, that _____
(Company Name or Individual)

gives to STAAB AGENCY or its designated representative, for an indefinite period of time and until canceled in writing, a limited Power of Attorney to act on its/his/her behalf with regard to all matters pertaining to the registering, licensing , transfer of ownership, and/or titling of trailer, semi-trailers, motor vehicles and/or power equipment in the State of Maine including, but not limited to, the preparation of any and all necessary paperwork required by the State of Maine Bureau of Motor Vehicles. For this service we agree to pay all mutually agreed upon fees.

SIGNED BY: _____
(Duly Authorized Officer of Company or Individual)

NOTE: If this Power of Attorney is in an Individual’s name, please include your Date of Birth: ____/____/____ and your Social Security Number: ____-____-____; or

If this Power of Attorney is in a Company Name, please include its Federal ID Number: _____.

STATE OF: _____)
County of: _____) ss. Dated: ____/____/____

Personally appeared, the above-named _____,
(Name of Officer or Individual)

_____ of _____ duly
(Title) (Name of Company)

authorizes and acknowledges the foregoing instrument to be his/her free act and deed in his/her said capacity and the free act and deed of said Company.

Before me,

Notary Public
Print Name: _____
My Commission expires: _____

THIS POWER OF ATTORNEY IS LIMITED IN THAT IT ONLY GIVES STAAB AGENCY AND/OR ITS DESIGNATED REPRESENTATIVE THE RIGHT TO SIGN ITS NAME WHERE YOUR NAME WOULD NORMALLY APPEAR ON REGISTRATIONS/LICENSES/TITLES/TRANSFERS OF OWNERSHIP OR LIKE DOCUMENTS. IT DOES NOT ALLOW STAAB AGENCY AND/OR ITS DESIGNATED REPRESENTATIVE TO SELL, LEASE, TRADE OR IN ANY OTHER WAY UTILIZE OR DISPOSE OF YOUR VEHICLES EXCEPT AS AUTHORIZED ABOVE. IT CAN NOT SIGN REGISTRATIONS OR TITLE DOCUMENTS ON YOUR BEHALF UNLESS THIS POWER OF ATTORNEY IS ON FILE.

NOTE: THIS POWER OF ATTORNEY WILL NOT BE ACCEPTED UNLESS A ONE-TIME \$20.00 CLIENT INSTALLATION FEE IS RECEIVED.