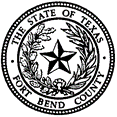
**Carmen P. Turner, MPA**

**Fort Bend County Tax Assessor Collector**

**Motor Vehicle Title Service Runner Authorization Form**

**Please complete this printable form online, or write legibly in blue or black ONLY within the space provided. This form will NOT be accepted and will be returned if it is illegible, altered, or incomplete.**

**Motor Vehicle Title Service Runner Authorization to be completed by the Title Service Owner (employer)**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Title Service Business Name** | | | | | **Badge Expiration (mm/yy)** |
| **Business Address** | **City** | **State** | **Zip** | **County** | **Business Phone** |
| **Printed Name of the Owner** | | | | | **Valid Texas DL or ID Number** |
| **Signature of Owner** | | | | | **Signature Date** |

**The following individual is authorized to act as a Motor Vehicle Title Service Runner for the above listed company.**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Full Legal Name of Runner (first, middle, last):** | | | | | |
| **Runner Residence Address:** | | **City:** | **State:** | **Zip:** | **County:** |
| **Runner Phone Number:** | **Alternate Number:** | **Runner Email Address:** | | | |
| **Valid Texas DL or ID Number:** | | **Badge Expiration (mm/yy)** | | | |

**Printed Name of Runner: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Signature of Runner: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

***NOTE: You are required to notify us immediately of any changes that would interfere with your Motor Vehicle Title Service Runner License***

**WARNING: Falsifying information on any required statement or government document is a criminal offense, and is punishable by fine and/or imprisonment.**