

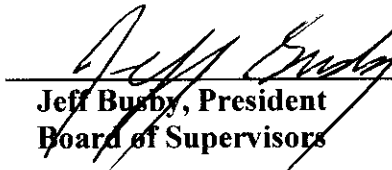
**ORDER: ACCEPT INSURANCE PAYMENT AND DECLARE SURPLUS
PROPERTY ROAD DEPARTMENT VEHICLE VIN 5344 2017 MACK**

Motion was made by Chad McLarty, duly seconded by David Rikard, to accept insurance payment and declare surplus property, Road Department vehicle VIN 5344, 2017 Mack.

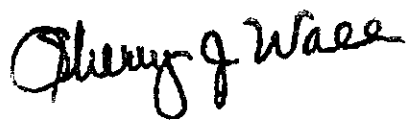
The vote on the motion was as follows:

Supervisor Kevin Frye, voted yes
Supervisor Jeff Busby, voted yes
Supervisor David Rikard, voted yes
Supervisor Chad McLarty, voted yes
Supervisor Mike Roberts, voted yes

After the vote, President Busby, declared the motion carried, this the 7th day of January, 2019.



Jeff Busby, President
Board of Supervisors



Sherry Wall, Chancery Clerk



DEPARTMENT OF
REVENUE
STATE OF MISSISSIPPI

Form 78-003-10-1-1-000

POWER OF ATTORNEY TO TRANSFER MOTOR VEHICLE

This document shall pass with the certificate of title and be included as a support document to application for new certificate of title and/or application for replacement certificate of title.

THE STATE OF MISSISSIPPI

COUNTY OF Lafayette

KNOW ALL MEN BY THESE PRESENT:

THAT I, Lafayette County Board of Supervisors

GRANTOR, NAME TO APPEAR IN SAME FORM AS CONTAINED IN CERTIFICATE OF TITLE

Lafayette (ADDRESS) OF THE COUNTY OF

and the STATE OF MISSISSIPPI, owner of

the following described motor vehicle, have made, constituted and appointed and by these present do make, constitute and appoint

MASIT

793 N. PRESIDENT ST, JACKSON MS 39202

(ADDRESS)

OF THE COUNTY OF

Hinds

and the STATE OF MISSISSIPPI, my true

and lawful attorney, for me and in my name, place and stead to sell, transfer and assign the motor vehicle described as follows to wit:

MAKE MACK

V.I.N. 1MIAND7Y4HMD25344

YEAR 2017

BODY TYPE DAY Cab

TITLE NUMBER _____

giving and granting unto my said attorney full power and authority to do and perform all and every act requisite and necessary to transfer and assign the legal title to said motor vehicle to anyone whomever, as may be designated by said attorney.

FEDERAL and STATE LAW requires that you state the mileage in connection with the transfer of ownership. Failure to complete or providing a false statement may result in fines and / or imprisonment.

I certify to the best of my knowledge that the odometer reading is the actual mileage of the vehicle unless one of the following statements is checked.

11500

Odometer Reading

(No Tenths)

1. I hereby certify that the mileage state is in excess of the mechanical limits of the odometer.

2. The odometer reading is not actual mileage. WARNING-ODOMETER DISCREPANCY

IN WITNESS WHEREOF I HAVE hereunto set my hand this 3 day of January

20 19

Lafayette County Board of Supervisors

Signature of Owner, Grantor

Lisa Carwyle, County Administrator

Printed Name of Grantor (If Title is in Company Name, Include appropriate Title, Partner, President, Sec. Treas., etc.)

Before me, the undersigned authority, on this day personally appeared Lisa Carwyle

(Individual Name Only)

known to me to be the person whose name is subscribed to the above foregoing instrument, and acknowledge to me that he executed the same for the purposes and consideration therein expressed.

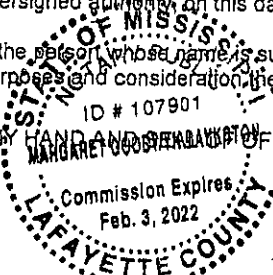
GIVEN UNDER MY HAND AND SEAL OF OFFICE THIS

20 19

January day of 3rd A.D.,

Margaret Goolbsy Banks

Notary Public



Odometer Disclosure Statement

Federal and State law require that you state the odometer mileage upon transfer of ownership. Failure to complete or providing a false statement may result in fines and/or imprisonment.

TO BE COMPLETED BY THE SELLER

I/We Lafayette County state that the odometer mileage indicated for the

Vehicle described below is: 11500 (check one) ☒ Miles ☐ Kilometers ☐ Hours.

And I/We hereby certify to the best of my/our knowledge that (check one statement below that is applicable)

- ☒ (1) the odometer reading is the actual mileage.
- ☐ (2) the odometer reading reflects the amount of mileage in excess of its mechanical limits.
- ☐ (3) the odometer reading is not actual mileage. Warning - Odometer discrepancy.

Year of Manufacture	<u>2017</u>
Make	<u>MACK</u>
Body Type	<u>Daycab</u>
Model	<u>CH4613</u>
Vehicle Identification Number	<u>1MIAN07Y4HMO25344</u>

Printed Name of Seller: Lafayette County

Address of Seller: PO Box 1240, Oxford MS 38655

Seller's Signature: Lafayette County, La Tourne

Seller's Certification Date: _____

TO BE COMPLETED BY THE BUYER

Printed Name of Transferee (Buyer): MASIT

Address of Buyer: 793 N. PRESIDENT ST, JACKSON MS 39202

Buyer's Signature: _____

Date Completed Form Received: _____

CERTIFICATE OF TITLE

Form 79-001-11-7-1-000

STATE OF MISSISSIPPI

ORIGINAL

VEHICLE IDENTIFICATION NUMBER	MAKE	YEAR	MODEL	BODY	TITLE NUMBER
1M1AN07Y4HM025344	MACK	2017	CHU	TT	H925708-01

TITLE DATE	DATE OF FIRST SALE FOR USE NEW ONLY	NO. CYL.	NEW / USED	TYPE OF VEHICLE	PASS. OR GVW
04052017	02162017	06	X	TK-TR	000

ODOMETER - TENTHS NOT INCLUDED

000000

OWNER

LAFAYETTE COUNTY BOARD OF SUPE
P O BOX 1240
OXFORD MS 38655

1ST LIENHOLDER (OR OWNER IF NO LIEN)

LAFAYETTE COUNTY BOARD OF SUPE
P O BOX 1240
OXFORD MS 38655

DATE:

MONTH | DAY | YEAR

2ND LIENHOLDER

DATE:

MONTH | DAY | YEAR

LIEN SATISFACTION: THE UNDERSIGNED HOLDER OF ABOVE DESCRIBED LIEN(S) ON THE MOTOR VEHICLE DESCRIBED HEREON HEREBY ACKNOWLEDGES SATISFACTION THEREOF

1ST LIEN

(LIENHOLDER)

BY

(SIGNATURE AND TITLE)

THIS

DAY OF

20

2ND LIEN

(LIENHOLDER)

BY

(SIGNATURE AND TITLE)

THIS

DAY OF

20



IN WITNESS WHEREOF I HAVE HEREUNTO SET MY HAND THIS

THE

05 DAY OF APRIL

20

17 00712

The Mississippi Department of Revenue hereby certifies that on application duly made, the person named herein is registered by this office as the lawful owner of the vehicle described subject to the liens or security interests as may subsequently be filed with the Mississippi Department of Revenue. This certificate of title is issued pursuant to the Mississippi Motor Vehicle Title Law Section 63-21-1, Mississippi Code of 1972, and subject to the provisions thereof.

CONTROL NUMBER

21888288

MISSISSIPPI DEPARTMENT OF REVENUE

VOID IF ALTERED

Lisa Carwyle

From: Sandra Frazier <sfrazier@ccmsi.com>
Sent: Wednesday, December 19, 2018 10:19 AM
To: Lisa Carwyle
Subject: Lafayette County claim # 18F39F788883
Attachments: Total Loss forms.pdf

Ms. Carwyle,

Cannon Cochran Management Services, Inc. is the third party claims administrator for the Mississippi Association of Supervisors Insurance Trust (MASIT). This letter will confirm our settlement regarding the above-mentioned collision claim.

We have inspected your 2017 Mack Lowboy and it was determined to be a constructive total loss with an Actual Cash Value of \$102,797.50. If you elect to keep the vehicle, the \$4553.53 salvage bid will be deducted from that amount along with the \$1000.00 deductible. Please let me know if the County elects to keep the salvage or not so that we can arrange to have it picked up.

I have attached two documents, a Motor Vehicle Power of Attorney which must be signed and notarized (sign in the "owner/grantor" location at the bottom of the document) and an Odometer Disclosure Statement; this document only needs to be signed in the "owner" location, it does not need to be notarized. Please return both documents to me with the original title, which must be signed on the back in the "seller" location. Once we receive the completed paperwork, payment will be issued to the county.

Please do not hesitate to call me with any questions or concerns. I can be reached at (601) 608-1023.

Sincerely,

Sandra Frazier

Sandra Frazier | CCMSI | Claims Consultant

P O Box 1378

Ridgeland, MS 39158-1378

601-608-1023 phone

601-899-0160 fax

sfrazier@ccmsi.com

www.ccmsi.com



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