## Affidavit of Liability and Guardianship (C.R.S. 42-2-108 and 42-2-109)

(Must be signed in the presence of a Motor Vehicle Employee or Notary Public)

Minor's First Name(s)	linor's Middle Name(s)		
Minor's Last Name(s)	Minor's Date of Birth		
<ul> <li>By signing this form I attest that:</li> <li>1. I understand I am assuming liability for the above</li> <li>2. I understand my signature may be withdrawn up license/permit.</li> <li>3. I am 21 years of age or older.</li> </ul>	pon written request, which will cancel the minor's		
4. I hold a valid Colorado Driver License or hold a presented proper military identification or do no appointing an Alternate Permit Supervisor to su	t hold a valid Colorado Driver License and am		
Printed Name of Person Assuming Liability	ID Type and Number		
Signature of Person Assuming Liability	Date		
I do not have a Colorado Driver License. I appoint the Alminor while they are learning to drive.	Iternate Permit Supervisor designated below to supervise the		
I am the parent or guardian of the above named minor. I for organ and tissue donation.	give my consent for the above named minor to be registered		
Motor Vehicle Employee	Date		
Alternate Perr	mit Supervisor		
By signing, I attest that I have a valid Colorado Drive	er's License and am at least 21 years of age.		
Printed Name of Alternate Permit Supervisor	CO Customer Identification Number (DL#)		
Signature of Alternate Permit Supervisor	Date		

## **Notary Seal**

Subscribed and affirmed, or sworn to before me in the			
County of		State of	
u ·			00
this	day of	,	20
Notary Signature			
Commission Expiration Date			

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