



Motor Vehicle Division

56-0113 R03/17 azdot.gov

AUTHORIZED THIRD PARTY (ATP) TITLE AND REGISTRATION SUPERVISOR CERTIFICATION AGREEMENT

Title and Registration Supervisor certification authorizes the Certified Title and Registration Processor to make responsible judgment decisions after a thorough review of applicable policy, procedure and statute on title and registration activities as well as contact various units directly within ADOT MVD. Requirements for Title and Registration Supervisor Certification are six (6) months or more of Title and Registration certification and an accuracy rate of 95% or higher. The participant must pass all tests/exams provided in training to receive Title and Registration Supervisor certification.

The following individual has been assigned to participate in the Title and Registration Supervisor Certification class:

Applicant Name

Authorized Third Party Name

Office #

ATP Representative or Contact Name

Title and Registration Supervisor Certification Terms and Conditions:

Applicant Name

RACF

- I hereby certify that I have six (6) months or more of Title and Registration certification.
- ⇒ I hereby certify that I have an accuracy rate of at least 95% or greater.
- ⇒ Training materials will be provided in the classroom.
- ⇒ I understand that I must **immediately** notify Third Party Administration if it becomes necessary to withdraw the applicant from the class for any reason.

Applicant: I acknowledge that I will be participating in an **4 hour class for 1 day**. Furthermore, I agree to follow the terms set forth above. I understand that it is necessary to thoroughly review, study and practice the materials being provided to me prior to taking the test. I understand that I must **immediately** notify Third Party Administration if it becomes necessary to withdraw for any reason.

Applicant Signature

Date

If you have any questions, please contact the Third Party Administration at CertificationDesk@azdot.gov or (602)712-8217 #4.

MVD USE ONLY OJT Approved by: _____ OJT Effective Date _____
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