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| |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | Surrendered license must accompany this form. | | | | | | | | | | | | | | | | | | | |  |  |  |  |  |  |  |  |  |  | | I hereby voluntarily surrender my driver license to the Kentucky Division of Driver Licensing for the following reason(s): | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | 1. |  | Insurance Purposes | | | | | | | | | | | | | | | | |  |  |  |  |  |  |  |  |  |  | |  | 2. |  | No longer want to drive | | | | | | | | | | | | | | | | |  |  |  |  |  |  |  |  |  |  | |  | 3. |  | Health Reasons *(Explain. Attach additional sheet if more space is needed.)* | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | I understand that: | | | | | | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  | a. | If I decide to reapply for my driving privilege, I will be required to return to the KYTC Driver Licensing Regional Office.  to have my license reissued. | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | b. | If I surrender any class license, I have up to five (5) years from the date I last held a valid license without being required to test. This does not apply to any driver whose driving privileges are suspended. | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | c. | This does not apply to permit holders of any type. | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | **NAME** *(first)* | | | | | | *(last)* | | | | | |  |  |  |  |  |  | **DATE OF BIRTH** | | | | | |  |  |  |  |  |  | | **ADDRESS** *(street)* | | | | | | | | | | | | **CITY** | | | | | | **STATE** | | **ZIP** | | | |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | **KENTUCKY LICENSE #** | | | | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | Class License/Permit being Surrendered *(Check all appropriate classes.)* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | A |  | B |  | C |  | D |  | E |  | M |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | **ENDORSEMENTS** *(if applicable)* | | | | | | | | | | | | **RESTRICTIONS** – **CDL** *(if applicable)* | | | | | | | | | | | |  |  |  |  |  |  | | **DATE** | | | | | |  |  |  |  |  |  | **WITNESSED** | | | | | | | | | | | |  |  |  |  |  |  | | **SIGNATURE** | | | | | | | | | | | | **TITLE** | | | | | | | | | | | |  |  |  |  |  |  | |