**INSTRUCTION:**

Attach this form to your Title and Registration application documents and forward to your County Clerk.

|  |  |  |
| --- | --- | --- |
| I, |       | hereby certify that I am a resident of Kentucky temporarily |

 *Full Name*

|  |  |  |
| --- | --- | --- |
| residing in |       | for at least thirty (30) days, but no longer than nine (9) months, and have purchased a vehicle. |
|  | *State* |  |
| I request this vehicle be inspected outside Kentucky in compliance with KRS 186A.115(5)(e). Pursuant to KRS 186A. 115(5)(d), Kentucky Servicemen and women residing outside Kentucky are exempt from the 30 day and 9 month rule. |

|  |  |  |  |
| --- | --- | --- | --- |
| Driver License # and/or SSN |       | Odometer Reading |       |

|  |  |
| --- | --- |
| Signature |  |
|  |
| Subscribed and attested before me this date |  | / | / | . | My commission expires |  | / | / |
|  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  My commission #: |  |
| Attesting Official/Notary Signature, Title & Date |  |

**INSTRUCTION:** This section is to be completed by state police, a local law enforcement agency, post provost, or similar officer of the post; or through the vehicle inspection program of another state.

|  |  |
| --- | --- |
| Name of Owner |       |

|  |  |  |  |
| --- | --- | --- | --- |
| Vehicle Year |       | Make |       |

|  |  |
| --- | --- |
| Vehicle Identification Number (VIN) (must be 17 digits) |       |

|  |  |  |  |
| --- | --- | --- | --- |
| Body Style  |       | Current State of Registration (if any) |       |

|  |  |  |  |
| --- | --- | --- | --- |
| Current Vehicle License Number  |       | Current Vehicle Title Number |       |

|  |  |
| --- | --- |
| Odometer Reading  |       |

|  |  |
| --- | --- |
| I certify this vehicle complies with all requirements of the inspection program of the State of  |       |

|  |  |
| --- | --- |
| Printed Name of Person Performing Inspection  |       |

|  |  |  |  |
| --- | --- | --- | --- |
| Agency  |       | Title |       |

|  |  |  |  |
| --- | --- | --- | --- |
| Signature  |  | Date |  |