

KENTUCKY TRANSPORTATION CABINET Department of Highways PERMITS BRANCH

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OWNERSHIP DISCLOSURE STATEMENT

	KYTC KEPT #:			
SECTION 1: LESSEE INFORMATION				
Sole Proprietor Partnership	Corporation LLC Business Trust	FEDERAL ID #		
owner is a corporation, business trust, interest in such entities to include silen Commonwealth of all persons involved	nip interest in this property leased from the or partnership, list all persons having fivent or limited partners. The lessee furthern lin any change of transfer of ownership once may result in termination of lease agr	epercent (5%) or mo nore agrees to notify of five percent (5%) o	re ownership the or more to include	
NAME	HOME ADDRESS	SSN	% OF OWNERSHIP	
•	or agreement listed heretofore and/or the an officer or employee of any state agenc		-	
Yes No (If yes, provide mor	e details. If more space is needed, attach			
OWNER	FULL NAME OF RELATIVE & SSN	AGENCY, BOARD, OR COMMISSION	TITLE	
SECTION 2: AUTHORIZED AGENT OF		TITLE		
NAME OF AUTHORIZED AGENT OR LESSEE		TITLE		
BUSINESS ADDRESS		PHONE (daytime)		
SECTION 3: SIGNATURE AUTHORIZ	ZATION	1		
The authorized agent or lessee certifie	s to be accurate the information submitte	ed above.		
AUTHORIZED AGENT OR LESSEE		DATE	-	
State of	County of	_		
	notary public in and for the state and cou	unty aforesaid, this t 	he	
NOTARY PUBLIC (signa	nture) MY CC	MY COMMISSION EXPIRES (date)		