Kentucky Transportation Cabinet
Department of Vehicle Regulation
Division of Motor Vehicle Licensing

AFFIDAVIT FOR REPLACEMENT OR NON-EXCHANGE

KRS 186A.990 states: Any person knowingly giving false information in connection with an application or title shall be guilty of forgery in the second degree.

When making application for a duplicate title on a vehicle, please use TC 96-182, Application for Title or Registration.

Affidavit for Replacement County:

I CERTIFY THAT MY                  IS

☐ Certificate of Registration   ☐ Lost
☐ Registration Plate             ☐ County Change
☐ Decal                           ☐ Stolen

☐ Destroyed                      ☐ Rusted
☐ Other

Describe

I hereby request a replacement for Registration Certificate, Registration Plate, or Decal # __________________________

Owner(s) Name __________________________ ID (SSN or DL#) __________________________

Owner(s) Name __________________________ ID (SSN or DL#) __________________________

Street Address __________________________

City __________________________ State __________________________ Zip __________________________

Signature __________________________ Date __________________________

Affidavit for Non-Exchange County:

Title or Registration CTL # __________________________

I CERTIFY BASED ON THE               OR REGISTRATION ACTION

FOllowing TITLE ACTION:              ☐ Plate Replacement

☐ Repo                              ☐ Vehicle Type Conversion
☐ Junked Vehicle                    ☐ Registration Conversion
☐ Salvage Title                     ☐ Registration Cancel
☐ Title Only Transfer

that the License Plate assigned to the motor vehicle or owner herein:

VIN __________________________ Plate __________________________

and Decal __________________________ described and currently registered in the Commonwealth of Kentucky does not

accompany the associated documents related to the aforementioned action because of the following non-exchange

reason: ☐ Lost ☐ Special Plate

☐ Stolen ☐ Out of State

☐ Destroyed ☐ Other

Describe

Name of Company or Dealership __________________________ ID (SSN or DL#) __________________________

Owner(s) Name __________________________ ID (SSN or DL#) __________________________

Lending Institution __________________________

Street Address __________________________

City __________________________ State __________________________ Zip __________________________

Signature of Authorized Representative __________________________

Owner’s Signature __________________________ Date __________________________

Notary for Replacement or Non-Exchange

Subscribed and attested before me on this date MM DD YYYY

My commission #: __________________________

My commission expires: MM DD YYYY

Attesting Official or Notary Signature and Title