REQUEST BY TOWING & STORAGE COMPANIES & LIEN HOLDERS FOR MOTOR VEHICLE OR BOAT RECORDS THAT INCLUDE PERSONAL INFORMATION

Driver’s Privacy Protection Act of 1994 Section 2721

Mail to:
PO Box 2014, Frankfort KY 40601-2014

Note: Title records older than five years are not available.

I hereby request the following information:

SELECT ONE:

- Towing and Storage
- Mechanic’s Lien
- Boat
- KY Search Only
- 50 State Search
- Lien Holder

VIN or HIN Number ____________________________
Title Number ________________________________
License Plate Number __________________________

Please place your initials beside the box you select.

- [ ] For use in providing notice to the owners of towed or impounded vehicles.
- [ ] For use in providing notice to the Lien Holder.
- [ ] For use in providing notice to the Boat owner(s).

Pursuant to Section 2722 of the Driver’s Privacy Protection Act of 1994, it is unlawful for any person to knowingly obtain or disclose personal information from a motor vehicle record, for any use not permitted under Section 2721 (b) of the Act. I certify that this release of information is permissible for the reason checked above and will be used only as indicated. The undersigned takes full responsibility for any violations of this act. A fee of $3.00 per record requested is required with this completed form. Please make check or money order payable to the Kentucky State Treasurer.

Printed name of person making request ____________________________
Agency or Company (If applicable) _________________________________
Signature ____________________________ Date ________________
Address ________________________________

STATE OF ________________

COUNTY OF ____________________________

Attested before me on this ___ day of _______ 20__

Email Address ____________________________ Phone ____________________________

DL# ____________________________

Notary/Attesting Official Signature and Title ____________________________

Federal ID # OR State of Issuance ____________________________

My commission #: ____________________________ Expiration: ___ / ___ / ______

FOR MVL USE ONLY

Date Processed ______ Fees Collected ______ Clerk’s Initials ______