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| **Mail to:**PO Box 2014, Frankfort KY 40601-2014 |
| **TO BE COMPLETED BY A GOVERNMENTAL AGENCY** |
| This information is requested **solely** for the benefit and use of carrying out the functions of a government agency.**Note:** Title records older than five years are not available. |
| **Select all applicable boxes.** |
| [ ]  Odometer or Mileage Discrepancy | [ ]  Copy of Certificate of Origin |
| [ ]  Signature Verifications | [ ]  Copy of O/S Title |
| [ ]  Tax Purposes | [ ]  Copy of VTR or Supporting Documents |
| [ ]  Owner Information | [ ]  Copy of Current Title |
| [ ]  Clerk Error or Correction | [ ]  Certify Documents |
| [ ]  Transfer Dates | [ ]  Court Documents |
| [ ]  Complete History | [ ]  Other (*Specify*.)  |       |  |
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| **VIN or HIN Number**  |       | **Title**  |       |  | **License Plate**  |       |
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| **Printed Name of Person Making Request** |  |  | **Agency or Company *(if applicable)***      |
| **Signature** | **Date** |  | **Address** |
| **STATE OF**       |  |       |       |       |
| **COUNTY OF**       |  | **City**      | **State** | **Zip** |
|  |  |  |       |
| **Attested before me on this** |  | **day of** |  | **20** |  |  | **Email Address** |  | **Phone** |
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|  |  |       |  |  |  |  |
| **Notary/Attesting Official Signature & Title** |  | **State of Issuance OR** **Fed Tax ID #** |  |
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|  |  |  | **FOR MVL USE ONLY:** |  |
| **My commission #:** |  |  | **Expiration:** |  | **/** |  | **/** |  |  |  | **Date Processed:** |       |  |
|  |  |  |  |  |  |  |  |  |  |  |  | **MM** |  | **DD** |  | **YYYY** |  |  | **Clerk’s Initials:** |       |  |

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