



**REQUEST FOR MOTOR VEHICLE OR BOAT RECORD
THAT INCLUDES PERSONAL INFORMATION**

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.

- | | |
|--|--|
| <input type="checkbox"/> Odometer or Mileage Discrepancy | <input type="checkbox"/> Copy of Certificate of Origin |
| <input type="checkbox"/> Signature Verifications | <input type="checkbox"/> Copy of O/S Title |
| <input type="checkbox"/> Tax Purposes | <input type="checkbox"/> Copy of VTR or Supporting Documents |
| <input type="checkbox"/> Owner Information | <input type="checkbox"/> Copy of Current Title |
| <input type="checkbox"/> Clerk Error or Correction | <input type="checkbox"/> Certify Documents |
| <input type="checkbox"/> Transfer Dates | <input type="checkbox"/> Court Documents |
| <input type="checkbox"/> Complete History | <input type="checkbox"/> Other (<i>Specify.</i>) _____ |

VIN or HIN Number _____ Title _____ License Plate _____

Printed Name of Person Making Request _____ Agency or Company (*if applicable*) _____

Signature _____ Date _____ Address _____

STATE OF _____ City _____ State _____ Zip _____

COUNTY OF _____ Email Address _____ Phone _____

Attested before me on this ____ day of _____ 20 ____

Notary/Attesting Official Signature & Title	DL # _____ Unit # _____ Badge # _____
	State of Issuance <u>OR</u> Fed Tax ID # _____

My commission #: _____ Expiration: ____ / ____ / ____
MM DD YYYY

FOR MVL USE ONLY:
Date Processed: _____
Clerk's Initials: _____