

Kentucky Transportation Cabinet Division of Motor Vehicle Licensing APPLICATION FOR DISABLED VETERANS FREE CERTIFICATE OF REGISTRATION AND LICENSE PLATE

(Complete and forward to your County Clerk.)

SECTION 1 - TO BE COMPLETED BY APPLICANT

NAME AGE		SOCIAL SECURITY NO		
ADDRESS	(Street or Post Office Box)	(City)	(State)	(Zip Code)
VEHICLE OWNED BY	APPLICANT:			
SERIAL NO	MAKE_	YEAR_	PREVIOUS KY LICENSE NO.	
Veterans Administration be passed by the Con	am a Disabled Veteran and a reside on under the provisions of Title 38, S gress of the United States. I further ne Veterans Administration awarding	ection 1901 of the certify that I have	e U.S. Code, or any other pu e provided the County Cour	ıblic law that may
(Signatu	ure of Applicant)		(Date)	
Subscribed and sworn	before me this	_day of		
My commission expire	es	, 20	My commission #:	
(Signature of Per	son Administering Oath)		(Date)	
	SECTION 2 - TO BE COMP	PLETED BY COL	UNTY COURT CLERK	
DISABLED VETERAN WAS ISSUED LICENSE NUMBER		HV	D <i>A</i>	ATE
SIGNATURE OF CLERK			COUNTY _	
No registration fee is	s required. Usage tax is due.			

INSTRUCTIONS FOR USE OF FREE LICENSE PLATES FOR DISABLED VETERANS

- In addition to completing the usual documentation for registering a motor vehicle and before the plate is issued, this form must be completed and a copy of the Veterans Administration letter awarding the motor vehicle to the applicant must be attached.
- 2. The disabled veteran's license plate must be exchanged with the county clerk for a regular plate before a transfer of the vehicle takes place.
- 3. Usage tax must be paid at the time the motor vehicle is first licensed in Kentucky.