Kentucky Transportation Cabinet  
Division of Motor Vehicle Licensing  

AFFIDAVIT OF INCOMPLETE TRANSFER  
Complete and submit this form to your County Clerk’s office for processing.  
County Clerk information may be accessed at:  
https://drive.ky.gov/Pages/County-clerks.aspx

I, ________________________________, hereby certify that on or about __________________  

________________________________________  
Seller/Transferor Name  
Date of Vehicle Transfer  

I transferred my interest in the following described vehicle:  
Year: ________  
Make: ____________________  
Vehicle Identification Number (VIN): ____________________  

to  

________________________________________  
Buyer Name, Address, City, State, Zip  

by executing an assignment and warranty of title to the transferee in the space provided on the Certificate of Title and executing the applicable portions of the vehicle transaction record (*TC 96-182*) as provided by KRS 186A.215(1).

Further, I request the registration on this vehicle be revoked as provided by KRS 186.180(4) or by any other law until this transfer has been processed.

Signature of Seller/Transferor  

________________________________________  
Address  

________________________________________  
City  

State  ___  Zip  ________  

Subscribed and attested to before me this date ______ / ______ / ______  

MM  DD  YYYY  

Attesting Official/Notary Signature and Title  

________________________________________  
My Commission #: ____________________  
My Commission expires: ______ / ______ / ______  

MM  DD  YYYY