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| |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | **INSTRUCCIONES**  Nota: Cualquier persona que a sabiendas proporcione información falsa, fraudulenta o errónea en relación con una solicitud de registro, y cuando sea necesario, titulación de un vehículo o cualquier solicitud de asignación de un número de identificación de vehículo o documentos de reemplazo, o da información suministrada en relación con la matriculación y cuando se requiera, titulación de un vehículo, será culpable de falsificación en segundo grado.  Se debe proporcionar toda la información para que la solicitud sea aprobada. Una solicitud incompleta resultará en denegación. Junto con la solicitud completa, también se requieren los siguientes elementos:   1. Título (anverso y reverso) para mostrar la cadena de propiedad adecuada 2. Todos los recibos (indicando el número de VIN) de todas las piezas de repuesto 3. Informe o inspección policial, si la policía estatal de Kentucky está involucrada   Las solicitudes también se pueden enviar por correo a:  Kentucky Transportation Cabinet Rebuilt Support Section, P.O. Box 201, Frankfort, KY 40601-2014 | | | | | | | | | | | **SECCIÓN 1: INFORMACIÓN DEL SOLICITANTE** | | | | | | | | | | | | **NOMBRE** (*nombre, segundo nombre, apellido*) | | | | | | **TELÉFONO** #  (   )    **-** | | | | | | **DIRECCIÓN** (*ciudad, estado, código postal*) | | | | | | **CORREO ELECTRÓNICO** | | | | | | **SECCIÓN 2: VEHÍCULO** **INFORMACIÓN** | | | | | | | | | | |  | **Vehículo-A** | |  |  | **Vehículo-B** | | |  | | | | **Año** | | **Marca** | **Modelo** | **Año** | **Marca** | | | **Modelo** | | | | **VIN #** | | | | **VIN #** | | | | | | | | **Ubicación de la placa VIN en el vehículo** | | | | **Parte del vehículo del que se toma la placa VIN** | | | | | | | | **Dirección física del vehículo A** | | | | | | | | | | | | **SECTION 3: ACCIONES** | | | | | | | | | | | | Solicito quitar la placa VIN del vehículo A y adjuntaré la placa VIN del vehículo A al | | | | | | |  | |  | | del vehículo B. | | | | | | | (*repuesto*) | |  |  |  |  | | --- | --- | |  | | | Ambas placas de vehículos están en mi poder.  Si  No | | | Si no, por favor explique. | | | Certifico que la transmisión del motor y el marco se usarán en un vehículo con VIN |  | | Entregaré la placa VIN original del Vehículo B al Gabinete de Transporte de Kentucky. | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | **SECCIÓN 4: FIRMAS Y CERTIFICACIONES** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | FIRMA DEL SOLICITANTE | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | FECHA |  | | | |  | | | Suscrita y atestiguado/a ante mí este | | | | | | | | |  | día de | | | |  | | | | | | | | 20 | |  | | . | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Certificación de la firma y el título del funcionario / notario | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |  | |  | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Mi comisión #: | | | | | |  |  | | | |  | Mi comisión expira | | | | | | | | |  | | / | |  | | / |  | | . |  |  | | | | |  |  |  |  |  |  |  |  | | | |  | |  | |  | |  |  |  |  | Mes | |  | | Día | |  | Año | |  |  |  | | | | |