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| PO Box 2014, Frankfort KY 40622 |
| **Note:** This form is filed in compliance with KRS 186.073 |
| **SECTION 1: COMMERCIAL TRAILER INFORMATION** |
| **NAME** *(Manufacturer/Dealer/Distributor)*      |
| **Year** | **Make** | **VIN Number** | **Temporary Placard Number** | **Date of Issue** | **Reason for Transport** | **Destination of Transport** |
|       |       |       |       |       |       |       |
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