



KENTUCKY TRANSPORTATION CABINET
 Department of Vehicle Regulation
 DIVISION OF MOTOR CARRIERS

TC 95-309
 05/2018
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APPLICATION FOR U-DRIVE-IT RENEWAL

Phone: (502)564-1257
Drive.ky.gov/

MAIL TO:
 Kentucky Transportation Cabinet
 Division of Motor Carriers
 PO Box 2004
 Frankfort, KY 40602-2004

OVERNIGHT DELIVERIES:
 Kentucky Transportation Cabinet
 Division of Motor Carriers
 200 Mero Street, 2nd floor
 Frankfort, KY 40622

ATTACH \$250.00 FILING FEE MADE PAYABLE TO "KENTUCKY STATE TREASURER."
 Credit Card, Money Order, Certified Check *(no cash by mail)*

ATTACH A COPY OF YOUR UPDATED INSURANCE DOCUMENT AND SUBMIT WITH THIS RENEWAL.

THE UNDERSIGNED HEREBY FILES APPLICATION FOR RENEWAL OF THE FOLLOWING KENTUCKY U-DRIVE-IT PERMIT

SECTION 1: BUSINESS INFORMATION (Please print)

| | | |
|-----------------------|---------------------|--|
| Permit Number: | FEIN Number: | Type of vehicles: <input type="checkbox"/> Lease / <input type="checkbox"/> Rental / <input type="checkbox"/> Both |
|-----------------------|---------------------|--|

Applicant Name:

| | |
|---|---|
| Mailing Address: <input type="checkbox"/> Check if changed. Address <i>(Street, P.O. Box, etc.)</i> | Physical Address: <input type="checkbox"/> Check if changed. Street Address |
| Address | Address |
| City, State, and ZIP Code | City, State, and ZIP Code |
| Telephone Number <i>(including Area Code)</i> | Telephone Number <i>(including Area Code)</i> |
| Fax Number <i>(including Area Code)</i> | Fax Number <i>(including Area Code)</i> |

E-Mail

SECTION 2: SIGNATURE & DATE

This certificate shall remain in effect until expired by law or revoked by the Transportation Cabinet. KYTC will bill the applicable fees due for each vehicle listed on this permit monthly. This certificate must be renewed on or before January 1 of each calendar year.

Signature: _____ Date: _____

Office Use Only
 Account Code:
 44 Application Fee \$ 250.00

Keep a copy for your records.