



Kentucky Transportation Cabinet
Department of Vehicle Regulation
Division of Motor Carriers
Driveaway Authority Application

TC 95-634
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MAIL TO: PO BOX 2007, Frankfort, KY 40602-2007
Phone: (502) 564-1257 Fax: (502) 564-4138
Drive.Ky.Gov

**Application for
New Authority or Additional Vehicles**

This form contains documents required for applications for Driveaway authority and for additional vehicles under an existing authority. The following sections are contained in this application form:

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Section 1. Application Instructions

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Section 2. Certificate of Assumed Name for Sole Proprietor Only

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(Complete, record, and return only if the applicant is a sole proprietor)

Section 3. Authority Application

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For your security, authority and vehicle credentials will be mailed by regular mail to your address on file with the Department of Vehicle Regulation unless the credential may be delivered in person to either a Sole Proprietor or an authorized officer or registered agent of the Corporation, Partnership, or Limited Liability Company listed with the Kentucky Secretary of State whose identity can be verified. You may request overnight or other expedited mail delivery by submitting a prepaid envelope addressed to the mailing address on file for the carrier.



Kentucky Transportation Cabinet
Department of Vehicle Regulation
Division of Motor Carriers
Driveaway Authority Application

Section 1. Application Instructions

To Apply for Driveaway Authority

Driveaway means the transporting and delivering of motor vehicles, except semitrailers and trailers, whether destined to be used in either a private or for-hire capacity, under their own power or by means of a full mount method, saddle mount method, the tow bar method, or any combination of them over the highways of this state from any point of origin to any point of destination for hire. It does not include the transportation of such vehicles by the full mount method on trailers or semitrailers.

You are required to follow these instructions to complete and mail or deliver this application form including the [Authority Application](#) (Section 3) and enclose the required fees to the Transportation Cabinet, Department of Vehicle Regulation, Division of Motor Carriers, Qualifications and Permits Branch, at 200 Mero Street, Frankfort, KY 40622. Your application may be returned for the correction of any deficiencies.

Enclose a Check or Money Order

You must enclose one check or money order made payable to the “Kentucky State Treasurer” in the amount of the \$250 application fee plus the per motor carrier vehicle fee of \$10. (\$250 application fee) + (number of vehicles X per vehicle fee of \$10 \$) = total fees \$.

Register your Business or Business Name

Business Organizations Must Register with the Kentucky Secretary of State

If you are a business organization that is required to be registered with the Kentucky Secretary of State in order to do business in Kentucky, you shall complete your registration as a domestic or foreign business organization prior to submitting this application. If you have any questions regarding the registration process please contact your attorney or the office of the Kentucky Secretary of State.

Sole Proprietors Must File a Certificate of Assumed Name with the County Clerk

If you are operating your business as a sole proprietor you are not required to and may not register your business name directly with the Kentucky Secretary of State, but you are required to file a certificate of assumed name with the county clerk where you maintain your principal place of business. Complete and record the enclosed [Certificate of Assumed Name for Sole Proprietor](#) (Section 3) then enclose the recorded copy with this application.

Section 1. Application Instructions

Qualification of Vehicles

Vehicles 10,001 lbs. or greater, require a USDOT number. You may visit <http://www.fmcsa.dot.gov/> to obtain a USDOT number. You must qualify each vehicle to be operated pursuant to a grant of authority before it may be lawfully operated under that authority. You must complete and submit the enclosed [Authority Application](#) (Section 3) for the number of vehicles required to operate as a driveaway.

Applying to Qualify Additional Vehicles under an Existing Authority

You may use this application form to qualify additional vehicles as an amendment to an existing authority. If using this application to request the authority to qualify additional vehicles you shall again submit the [Authority Application](#) (Section 3) and enclose a check or money order made payable to the “Kentucky State Treasurer” in an amount equal to \$10 per qualified vehicle fee. The \$250 application fee is not required to apply for additional vehicles.

Authority and Qualified Vehicle Credentials

For your security, if the Department of Vehicle Regulation approves your application for new authority or for additional qualified vehicles, the authority and vehicle credentials issued by the department will be mailed by first class mail to your mailing address on file with the department. Alternatively, the credentials may be delivered in person to either a Sole Proprietor or an authorized officer or registered agent of the Corporation, Partnership, or Limited Liability Company listed with the Kentucky Secretary of State whose identity can be readily verified. You may request overnight or other expedited mail delivery by submitting with this application a corresponding prepaid envelope addressed to your mailing address on file.

Application Process Assistance

If you have questions about this application form or the application process, please contact the Department of Vehicle Regulation, Division of Motor Carriers, Qualifications and Permits Branch, by phone at (502) 564-1257 or by email at kytc.passhgw@ky.gov.



**Division of Motor Carriers
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Section 2. Certificate of Assumed Name for Sole Proprietor
(Complete, record, and return only if the applicant is a sole proprietor.)

If the applicant is a sole proprietor, file and record this page with the county clerk where you maintain your principal place of business and then enclose the recorded copy with this application.

Pursuant to the provisions of **KRS 365.015**, the undersigned applies to assume a name and, for that purpose, submits the following statement:

1. The assumed name is: _____

2. The legal name of the individual adopting the assumed name is:

3. The street address is: _____

City _____ County _____ State _____ ZIP _____

4. The mailing address is: _____

City _____ County _____ State _____ ZIP _____

I declare under penalty of perjury under the laws of Kentucky that the foregoing is true and correct.

Signature _____

Print name _____ Date _____

THIS SIGNATURE SHALL BE NOTARIZED.

STATE OF _____

COUNTY OF _____

Subscribed and sworn to before me on this the _____ day of _____ 20 _____.

Notary Public _____

My commission expires on _____.

An assumed name shall be effective for a term of five (5) years from the date of filing and may be renewed for successive terms upon filing a renewal certificate within six (6) months prior to the expiration of the term, in the same manner of filing the original certificate of assumed name.



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Section 3. Authority application

New authority <input type="checkbox"/>		Or additional vehicles <input type="checkbox"/>		Qualification year	20__
				Company no.	

USDOT _____ number ____

_____ Legal name _____

_____ Doing _____ business

as _____

Mailing street _____ address ____

_____ City _____

_____ County _____ State _____ Zip ____

Phone _____ Fax _____

Email address (required)

Number of vehicles		
Per vehicle fee	X \$10.00	
Application fee	+ \$250.00	<i>(New authority only)</i>
Total fees		

Signature required from the Sole Proprietor or the officer or registered agent of the Corporation, Partnership, or Limited Liability Company.

Signature _____ Date _____

Print name _____ Print title _____