

84-FCC-263

**MOTOR VEHICLE
INSURANCE AFFIDAVIT**

Date _____

Susan Lamb
FAYETTE COUNTY CLERK

This is to certify that motor vehicle, VIN _____, Plate # _____
is no longer being operated in Kentucky due to:

- () Vehicle is registered/titled out of state.
- () Vehicle is inoperable or is not being operated by choice.

____ Registration and plate have been surrendered to the Fayette County Clerk.

____ Registration and or plate are not available due to _____

____ Ad valorem taxes (if due) have been paid.

Owners Signature

Subscribed and sworn to before me this _____ day of _____, 20____.

Deputy Clerk/Notary Public

My commission expires: _____