



Kentucky Transportation Cabinet
Division of Motor Vehicle Licensing

TC 96-167
 Rev: 2/ 2013

P. O. Box 2014
 Frankfort, KY 40622

AFFIDAVIT FOR REPLACEMENT OR NON-EXCHANGE

Affidavit for Replacement County: FAYETTE

I CERTIFY THAT MY

- Certificate of Title
- Certificate of Registration
- Registration Plate
- Decal

IS

- Lost
- County Change
- Stolen
- Destroyed
- Rusted
- Other _____

I hereby request a replacement for Title, Registration Plate or Decal Number _____
 KRS 186.180

Describe
08 999ABC

WARNING:
 KRS 186A.990 states that any person knowingly giving false information in connection with an application for registration or title shall be guilty of forgery in the second degree.

Chuck Conner
 Signature of Owner I.D. (SSN or DLN)

Signature of Owner I.D. (SSN or DLN)

123 MAIN ST
 Street Address

Print Owner(s) Name

LEXINGTON KY 40507
 City State Zip Code

Notary for Replacement:

Subscribed and attested before me on this date 11 14 14 My Commission expires 12 31 14
 MM DD YY MM DD YY

John J Public notary
 Attesting Official or Notary Signature and Title

Affidavit for Non-Exchange County: FAYETTE

Administrative Regulation 601 KAR 9:135

Title or Registration CTL # _____
 I certify based upon the following title action: Repo Junked Vehicle Salvage Title Title Only Transfer
 or Registration action: Plate Replacement Vehicle Type Conversion Weight Change Registration
 Conversion Renew Conversion Registration Cancel, that the **License Plate** assigned to the motor vehicle herein:
 VIN _____ Plate _____
 and Decal _____ described and currently registered in the Commonwealth of Kentucky does not
 accompany the associated documents related to the aforementioned action because of the following non-exchange
 reason.

Lost Stolen Destroyed Special Plate Out of State Other _____
 Describe

Signature or Authorized Representative I.D. (SSN or DLN)

Owner (s) Signature I.D. (SSN or DLN)

Name of Company or Dealership

Printed Owner(s) Name

Lending Institution

Street Address

Street Address

City State Zip Code

City State Zip Code

Notary for Non-Exchange:

Subscribed and attested before me on this date _____ My Commission expires _____
 MM DD YY MM DD YY

Attesting Official or Notary Signature and Title