



KENTUCKY TRANSPORTATION CABINET
Department of Vehicle Regulation
DIVISION OF MOTOR VEHICLE LICENSING

TC 96-150
Rev. 07/2016

APPLICATION FOR COMMERCIAL TEMPORARY TRAILER OR MOTOR VEHICLE PLACARD

Mail to: PO Box 2014, Frankfort KY 40622-2014

INSTRUCTIONS

1. Use this form to request a Temporary Registration Placard in compliance with KRS 186.072 or KRS 186.073.
2. Requests must be submitted by the manufacturer, dealer, distributor, contract transporter, or by the owner of the commercial motor vehicle or commercial trailer.
3. Complete all requested information and mail, along with payment, to the Division of Motor Vehicle Licensing; or the application and payment may be dropped off at the Transportation Cabinet's One-Stop-Shop, 200 Mero Street, Frankfort KY 40622, Monday through Friday from 8:00 am through 4:00 pm EST. Allow 2 to 3 business days for processing. For holiday closures, please contact our office at (502) 564-1257.
4. The fees are \$100.00 for a commercial motor vehicle and \$5.00 for a commercial trailer.
5. Submit a check or money order payable to the Kentucky State Treasurer.

SECTION 1: COMMERCIAL TEMPORARY TRAILER APPLICANT INFORMATION

NAME OF OWNER/TRANSPORTER		VEHICLE YEAR	VEHICLE MAKE
VEHICLE IDENTIFICATION NUMBER (VIN) OR SERIAL #			
PLACARD IDENTIFICATION #		CURRENT VEHICLE TITLE #(if any)	
DRIVER LICENSE #	STATE	PHONE	EMAIL
SIGNATURE (Applicant)		DATE	
MAILING ADDRESS			

SECTION 2: COMMERCIAL TEMPORARY MOTOR VEHICLE APPLICANT INFORMATION

NAME OF OWNER/TRANSPORTER		VEHICLE YEAR	VEHICLE MAKE
VEHICLE IDENTIFICATION NUMBER (VIN) OR SERIAL #			
PLACARD IDENTIFICATION #		CURRENT VEHICLE TITLE #(if any)	
DRIVER LICENSE #	STATE	PHONE	EMAIL
SIGNATURE (Applicant)		DATE	
MAILING ADDRESS			

FOR MVL USE ONLY

DATE ISSUED	
-------------	--