Motor Vehicle Commission APPLICATION FOR VEHICLE REGISTRATION (Please complete both sides – print clearly)				PLATE NUMBER PREFIX		FIX	VEHICLE IDENTIFICATION NUMBER (VIN)		
NAME				NAME/LEASEE – If the vehicle is being leased for a period of one year or more, the owner,must supply the leasee's information,					
STREET ADDRESS				STREET ADDRESS					
ADDRESS ADDRESS									
CITY STATE ZIP COUNTY				CITY STATE ZIP DATE L				TERM (Months)	
CITY KY 56566									
I I I	COMMERCIAL REGISTRATION ONLY REQUESTED REGISTRATION CODE:				N WEIGHT ERS:	E CANCELLATION	DATE LEASE CANCEL		
CHECK HERE IF THIS ADDRESS US CHANGED FROM PREVIOUS RECORDS	DUPLICATE TRANSFER	REPLACEMEN	T PLATES	CODE CHANGE			WILL THE VEHICLE BE USED AS A RENTAL? YESNO		
			ULL DATE OF	L DATE OF BIRTH			"SOCIAL SECURITY NUMBER		
6756 FEMALE				/	1	- A			
2422424			ULL DATE OF	L DATE OF BIRTH 18 / 13 / 2020			"SOCIAL SECURITY NUMBER 234 -23 - 42		
LEASEE'S N.J. DRIVER LICENSE NUMBER/CORPCODE MALE PYE COLOR FUL				BIRTH		"SOCIAL SECURITY NUMBER			
FEMALE -				/	/	4 4			
OWNER SIGN HERE								HE NUMBER WILL BE USED OF MOTOR VEHICLE FEES,	
CO-OWNER SIGN HERE									
(WE) THE APPLICANT(S) CERTIFY THE STATEMENTS ON BOTH SID COMMERCIAL VEHICLE DECLARE KNOWLEDGE OF THE FEDERAL						ATION PRIVILE	EGES APPLICATIONS FOR	A REGISTRATION FOR A	
BA-49 (R6/15)									