

Application for Special License Plates

PLEASE PRINT OR TYPE:

Name: _____ Social Security No.: _____

Address: _____

City: _____ County: _____ Zip: _____

I apply for the following special license plate:

- | | |
|---|---|
| <input type="radio"/> Veterans | <input type="radio"/> Kentucky Law Enforcement Memorial |
| <input type="radio"/> Olympic | <input type="radio"/> Ducks Unlimited |
| <input type="radio"/> Technical School | <input type="radio"/> Wild Turkey Federation |
| <input type="radio"/> Child Victim | <input type="radio"/> Independent Colleges & Universities _____ |
| <input type="radio"/> *Marine Corps | <input type="radio"/> YMCA |
| <input type="radio"/> Nurses | <input type="radio"/> Special Agriculture Plate _____ |
| <input type="radio"/> Soccer | |
| <input type="radio"/> Union Member | |
| <input type="radio"/> Professional Firefighter | |
| <input type="radio"/> *Knights of Columbus | |
| <input type="radio"/> Other: Name of Organization _____ | |

(Must be a non-profit organization, without political or religious connotations, to qualify)

*One year time frame does not apply.

Each application must be accompanied by a check made payable to: "KENTUCKY STATE TREASURER" in the amount of \$25.00.

If 900 applications for a particular plate are not received within one year of September 1, the plate WILL NOT be produced.

This application, or requests for refunds, will be accepted at any time.

Applications may be submitted to:

Division of Motor Vehicle Licensing
Special License Section
P.O. Box 2014
Frankfort, KY 40602-2014