

Kentucky Transportation Cabinet

Division of Motor Vehicle Licensing AFFIDAVIT OF INCOMPLETE TRANSFER

Complete and submit this form to your County Clerk's office for processing.

County Clerk information may be accessed at: https://drive.ky.gov/Pages/County-clerks.aspx

l,		, hereby co	, hereby certify that on or about			
	Seller/Transferor Name			Date of	Vehicle Transfer	
I transferred m	y interest in the following de	escribed vehicle:				
Year:	Make:	Vehicle Identification Number (VIN):				
to						
		Name, Address, City, Stat				
-	n assignment and warranty on a policable portions of the vel					
	est the registration on this ve is been processed.	ehicle be revoked as	provided by KRS 186	5.180(4) or by a	ny other law until	
Signature of Se	ller/Transferor					
Address						
City			State	Zip		
Subscribed and	d attested to before me this	date /	/			
Attesting Offici	al/Notary Signature and Title	e				
My Commissio	n #:	My Commiss	on expires:	/	/	