KENTUCKY TRANSPORTATION CABINET
Dept. of Vehicle Regulation/Division of Motor Carriers
P.O. Box 2007, Frankfort, KY 40602-2007
(502) 564-4127 (8:00 AM - 4:30 PM EST)
http://dmc.kytc.ky.gov

TC 95-567
Rev. 9/09

2010 KENTUCKY INTRASTATE FOR-HIRE AUTHORITY RENEWAL

(EXCEPT HOUSEHOLD GOODS AND PASSENGERS)

Business Name and Address:

LIST YOUR COMPANY NUMBER (S):

(K) NUMBER: _____

KYU NUMBER: _____

DOT NUMBER: _____

KIT NUMBER: _____

TO ENSURE RECEIPT OF THIS AUTHORITY BEFORE THE EXPIRATION OF YOUR CURRENT AUTHORITY, RETURN PRIOR TO NOVEMBER 30, 2009

FEES:

Number of vehicles _____ X $10.00 per vehicle = $ _____

The application fee of $25.00 **must** also be submitted. + $ 25.00

Total enclosed = $ _____

- **Make fees payable to Kentucky State Treasurer.**
- **The company's evidence of insurance (Form E) must be on file with this agency and in good standing. Carriers with invalid insurance will not be processed until receipt of the Form E.**
- **Write corrections to your company name, address and/or telephone numbers directly on this form. Name and/or address changes require a revised insurance form (Form E).**
- **Future additions to this authority must be submitted on the VEHICLE ADD ON FOR: Kentucky Intrastate For-Hire Authority form. This form may be obtained from our web site: http://dmc.kytc.ky.gov or by contacting this agency.**

The undersigned hereby files application for the renewal of Kentucky Intrastate For-Hire Authority. This authorization shall remain in effect until expired by law or revoked by the Kentucky Transportation Cabinet. Any vehicles operated under this authority must carry verification of insurance. I certify that I have access to and am familiar with all applicable regulations of the U.S. Department of Transportation relating to the safe operation of commercial vehicles and the safe transportation of hazardous materials and I will comply with these regulations:

***** FAXED COPIES NOT ACCEPTED *****
Original form must be mailed

PRINT NAME AND TITLE

AUTHORIZED SIGNATURE

DATE

( )
TELEPHONE NUMBER

Office Use Only
Account codes:
31 $
33 $ 25.00

IF YOU NO LONGER NEED THIS AUTHORITY PLEASE CHECK HERE: ☐

If using overnight delivery services, please send to: Division of Motor Carriers, 200 Mero Street, Frankfort, KY 40622