Please remit $25 Filing Fee

KENTUCKY TRANSPORTATION CABINET
Division of Motor Carriers
P.O. Box 2007
Frankfort, Kentucky 40622

APPLICATION FOR U-DRIVE-IT

ATTACH TWENTY-FIVE DOLLAR ($25) FILING FEE MADE PAYABLE TO "KENTUCKY STATE TREASURER"

1. Applicant: _____ Telephone: _____

   Street: _____

   City: _____ State: _____ Zip Code: _____

2. **If Corporation,** give state of incorporation, principal address and agent name and address for Kentucky process, if non-resident **ATTACH** current copy of certificate of good standing from sate of incorporation and certificate to do business in Kentucky, if incorporated in another state. If foreign corporation, please attach certficiate from the Secretary of State's Office authorizing the corporation to do business in Kentucky as a foreign corporation.

   _____

   _____

   If partnership, give names and address of partners and their respective interest.

   _____

   _____

   If nonresident, give names and address of partners and their respective interest.

   _____

   _____

3. Please file with this application the prescribed public liability and property damage insurance required by KRS 281.615.

4. In what month was corporation established? _____
   *** This month shall be used as the established month for licensing all vehicles under this permit.**

5. Motor Vehicle Leasing Dealer number assigned by the Motor Vehicle Dealer Commission: _____

6. Has applicant ever been denied any authority by this Cabinet, or has any official or corporate officer ever been cited by the Transportation Cabinet or violations of the laws or applicable regulations or convicted of a felony?
   ☐ Yes ☐ No

7. Applicant shall submit to the Department in a written affidavit the following:

   A. A description of applicant's facility and type of equipment proposed to be rented or leased;

   B. A recent financial statement for the applicant; and

   C. A brief history of applicant's current business, including date of formation, prior experience, etc.

Applicant: _____ Telephone: _____

Street: _____

City: _____ State: _____ Zip Code: _____

I, the undersigned official of the above individual, partnership or corporation, after being first duly sworn, state that the above information is true and correct to the best of my knowledge and belief.

In addition, I certify that all vehicles registered under the U-Drive-It operation proposed in this application will be offered to the general public for lease or rent. I certify that each transation is arms-length and is based on a fair rental or lease value of the vehicle. I further certify that I have access to and am familiar with all statutes and regulations applicable to the proposed U-Drive-It permit for which I am making.

Signature: _____ Date: _____
Applicant Official

THIS APPLICATION SHALL BE NOTARIZED

State of _____

County of _____

Subscribed and sworn to before me this the _____ day of _____ , 20 _____ .

Notary Public: _____

My Commission Expires: _____