



KENTUCKY TRANSPORTATION CABINET
Department of Vehicle Regulation
DIVISION OF MOTOR VEHICLE LICENSING

TC 96-217
Rev. 10/2025
Page 1 of 1

**APPLICATION FOR DISABLED VETERANS
FREE CERTIFICATE OF REGISTRATION AND LICENSE PLATE**

[KRS 186.041](#) & [KRS 186.162\(2\)\(A\)](#)

INSTRUCTIONS: In addition to completing the usual documentation for registering a motor vehicle and before the plate is issued, this form must be completed and a copy of the authorization from the U.S. Department of Veterans Affairs must be supplied.

SECTION 1: APPLICANT INFORMATION

FIRST NAME	MIDDLE INITIAL	LAST NAME	KY DL #/KY ID #	
ADDRESS (street or PO Box)		CITY	STATE	ZIP

SECTION 2: VEHICLE INFORMATION

YEAR	MAKE	MODEL	VEHICLE IDENTIFICATION # (VIN)																				
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SECTION 3: APPLICANT STATEMENT & NOTARIZATION

(Check all that apply.)

I hereby certify that I am a resident of Kentucky and a disabled veteran who:

- ☐ Received assistance to purchase a vehicle from the US Department of Veterans' Affairs
☐ Has been declared by the US Department of Veterans' Affairs to be 100% service-connected disabled
☐ Is a recipient of the Congressional Medal of Honor.

I further certify that I have provided the county clerk with documentation to support the qualifying certification.

APPLICANT SIGNATURE

DATE

Subscribed and sworn before me this _____ day of _____

My commission expires _____, 20____. My commission # is _____.

NOTARY SIGNATURE

DATE

COUNTY CLERK USE ONLY

Plate issued: _____

Date: _____

CLERK NAME (Print.)

CLERK SIGNATURE

COUNTY

Collect any applicable usage tax or ad valorem taxes. Do not collect a registration fee.