

Kentucky Transportation Cabinet
Division of Motor Vehicle Licensing
P.O. Box 2014
Frankfort, KY 40802-2014

TC 96-15E
Rev. 3-2009

Application for Special License Plate



Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Pursuant to KRS 186.164

Must be a non-profit organization and in compliance with the parameters of the Kentucky Revised Statutes.

I am applying for the following special license plate: Second Chance @ Life / Donate Life

Application must be submitted to (point of contact person):

Andreas Price

Name of Organization: Second Chance @ Life

Address: P. O. Box 183

City: Louisville State: KY Zip Code: 40201

Each application must be accompanied by a check in the amount of \$25.00 made payable to the **sponsoring organization**.

Additional voluntary donations for special plates, over and above the cost of the plate may be made at the County Clerk's office. \$ 10.00

At least 900 applications for a particular plate must be received within one year or the plate will not be produced.

This application will be accepted at any time.

Original – Organization

Copy - Customer