61A211 (10-01)
Commonwealth of Kentucky
REVENUE CABINET

PUBLIC SERVICE COMPANY SCHEDULE OF OWNED AND/OR LEASED MOTOR VEHICLES WITH KENTUCKY SITUS as of January 1, 2002 assessment date

EDUCATION PAYS

This information will be used by the Kentucky Revenue Cabinet, Department of Property Valuation, Public Service Branch to ensure proper credit for motor vehicle assessed values on the taxpayer's 2002 tax year Notice of Assessment for Public Service Company. It may also be used by local property valuation administrators to ensure correct districting of the company's reported taxable vehicles with Kentucky situs.

Taxpayer's Name and Address

Mail on or before December 28, 2001 to:
COMMONWEALTH OF KENTUCKY
REVENUE CABINET
DEPARTMENT OF PROPERTY VALUATION
Public Service Branch
200 Fair Oaks Lane, 4th Floor, Station 32
Frankfort, Kentucky 40620

A. Person Completing Schedule _____ Telephone Number _____

B. Does the company **also** file Kentucky Revenue Form 61A203, Apportioned Vehicle Property Tax Return, with the Department of Property Valuation, Motor Vehicle Branch? ☐ Yes ☐ No. If yes, the form will be mailed to you in a separate package.

If yes, the company KYU number is _____ . Note that this Form 61A211 from the Public Service Branch should not be used to report your apportioned vehicle license plate numbers, but do report the KYU number, if applicable.

C. In Columns 1 through 4 below, list owned and/or leased *regular* motor vehicles **taxable through the county clerks' offices** by current plate number, vehicle identification number and the vehicle's Kentucky address and county of situs. Situs is the address where the motor vehicle is physically located and customarily kept in Kentucky as of the January 1 assessment date.

If more than one plate number is reported, sort and list by city and county, giving each complete street address.

D. Indicate leased vehicles with **(L)** in Column 2 below, if the lessee pays the property tax.

E. ----------Please type or print clearly. If more space is needed, make copies or prepare a similar schedule.----------

(1) Current Plate Number	(2) If Leased (L)*	(3) Vehicle Identification Number	(4) Vehicle's Address (Situs) in Kentucky Street	City	County

*See Item D.

Taxpayer Name _____ GNC:

A. through D. See page 1 for additional instructions.

E. ----------Please type or print clearly. If more space is needed, make copies or prepare a similar schedule.----------

(1) Current Plate Number	(2) If Leased (L)*	(3) Vehicle Identification Number	(4) Vehicle's Address (Situs) in Kentucky Street	City	County

*See Item D.