

**APPLICATION FOR LIQUEFIED PETROLEUM GAS
MOTOR FUELS TAX EXEMPTION PERMIT**

This application for exemption shall not in any way affect the taxes imposed on heavy equipment motor carriers (KYU) administered by the Transportation Cabinet under Kentucky Revised Statutes 138.655 to 138.725.

Motor vehicle registered in name of _____

Address _____ Telephone () _____
Number and street or rural route

City, town or post office _____ County _____ State _____ ZIP code _____

Motor Vehicle Information

Make of vehicle _____ Type _____ Gross vehicle weight _____ Year _____

Engine or ID number _____ License number _____

Seating capacity _____ Engine displacement in cubic inches _____ Number of cylinders _____

Was this vehicle equipped with any of the following systems before or after conversion? Yes No

If yes, which system? Three-way catalyst with feedback controls Fuel injection Turbocharger

Stratified charge, rotary or other engine of unconventional design Variable venturi carburetor Air-cooled engines

Conversion System or Carburetion System Information

Name of carburetion system _____ Carburetion/mixer model number _____

Vaporizer/regulator number _____ Date carburetion system installed _____

Does the system use both gasoline and liquefied petroleum gas? Yes No

Is the carburetion system installed in accordance with manufacturer's specifications and instructions? Yes No

AFFIDAVIT

The affiant swears or affirms that the statements and items entered on this application and any additional attachments are, to the best of his or her knowledge, true and correct in every particular.

Subscribed and sworn to before me this _____ day of

_____, 19____. _____
Signature of Affiant

Notary Public

My commission expires _____ _____
Title of Affiant

DO NOT COMPLETE — FOR CABINET USE ONLY

Approved Disapproved

By _____ Date _____ Permit Number _____