73A054 (4-21) Commonwealth of Kentucky DEPARTMENT OF REVENUE

## KENTUCKY APPLICATION FOR DEALER LOANER/RENTAL VEHICLE TAX

FOR OFFICIAL U	ISE ON	ILY
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Mail completed application to the **Kentucky Department of Revenue**,

Motor Vehicle Usage Tax Section, P O Box 1303, Station 64, Frankfort, KY 40602-1303

Name of Business	Enter Legal Name			Current MVC Dealer Number		
Location of Business						
Dusilless	Number and Street	City	С	ounty	State	ZIP Code
Mailing Address						
	P.O. Box or Number and Street	City	С	ounty	State	ZIP Code
	Telephone Number		Kontucky E	mplovor's Withhold	Account I	
Business Information	( ) _	Kentucky Employer's Withhole  Kentucky Corporation Income and Lice				
	Fax Number	Kentucky Sales and Use				
	_					
	Federal Employer I.D. Number	Kentucky Unemployment Insurance				
	Name of Owner		Title		Social Security Numl	per or FEIN
	Home Address				Telephone Number	
Owner Information						
	Name of Co-Owner		Title		Social Security Numl	per or FEIN
	Home Address			Telephone Number		
Contact Person			( ) _			
	Contact Name	l	Contact Telephon	e Number	Contact E-Ma	il Address
	Does your dealership furnish repair services to your customers? □ Yes □ No					
Eligibility	2. Do you loan or rent vehicles to the customers while repairing their vehicle? ☐ Yes ☐ No					
	If no, stop, sign and return this application to the Kentucky Department of Revenue.  If yes, continue.					
	3. Submit a list of the vehicles you use as loaners/rentals on the reverse of this form.					
The above statements are hereby certified to be correct to the best knowledge and belief of the undersigned who is duly authorized to sign this application.						
Signature of Owner or Partner Title Date (If a corporation, an officer must sign)						ate

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Vehicles Used as Loaners/Rentals							
Line #	Vehicle Identification Number	Year	Make	Model			
1							
2							
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