TC 96-187 December 2013



## Kentucky Transportation Cabinet Division of Motor Vehicle Licensing TITLE LIEN STATEMENT

☐ ORIGINAL FILING	CONTINUATION Original File #	TERMINATION Original File #
	Original File Date	Original File Date
1. Debtor(s) (Last Name First) and Address	2. Secured Party Name and Address	3. For Filing Officer (Date, Time, Number and Filing Officer)
4. Vehicle information:  YEAR MODEL MAKE	VEHICLE IDENTIFICATION NUM	BER ADDITIONAL DESCRIPTION
NOTE:  (1) This is a multi-purpose form that can only be used once. A new form must be completed by the Secured Party upon amendment, continuation, assignment or termination. A termination statement must be signed by the secured party.  (2) In compliance with KRS 186A.190 (2), "the notation of security interests relating to property required to be titled in Kentucky through the county clerk shall be done in the office of the county clerk of the county in which the debtor resides". Additional information regarding the required county of residence can be found in subsections (a-j) of KRS 186A.190 (2).		
Authentication of Debtor(s)		Authentication of Secured Party(s) (Required for filing a termination)
Date		Date
Optional for County clerk use  Date & Time Processed:		
Fees Collected:		
Clerks initials:		