

**Submit in Duplicate**

KENTUCKY TRANSPORTATION CABINET  
DEPARTMENT OF VEHICLE REGULATION  
DIVISION OF MOTOR VEHICLE LICENSING  
FRANKFORT, KENTUCKY 40622

**APPLICATION FOR DISASTER AND EMERGENCY SERVICES PLATE**

\_\_\_\_\_  
*Name*

\_\_\_\_\_  
*Address*

\_\_\_\_\_  
*City* *State* *Zip Code*

I certify that I am eligible for a Disaster and Emergency Services Plate.

\_\_\_\_\_  
*Signature*

**This is to certify that the applicant named above is a current member of either a Disaster and Emergency Services Organization or a Volunteer Rescue Squad.**

\_\_\_\_\_  
*Signature*

\_\_\_\_\_  
*Title*

**Must be signed by a Mayor, County Judge/Executive or a DES Coordinator.**

The original must be presented to the County Clerk of the member's county of residence in order to purchase the DES license plate. One copy will be retained for individual's file.