KENYA REVENUE AUTHORITY

THE TRAFFIC ACT

(Cap. 403, Section 6 (2) rule 5)

APPLICATION FOR REGISTRATION AND LICENCE OF MOTOR VEHICLE TRAILER

Form A

IMPORTANT:- When it is required to licence a vehicle at the time of registration, this form may be used for both purposes without the necessity of completing form **C.** Unless this application is completed in every Respect, delay may occur in the issue of a licence,

For Official Use Only
Serial No.of Licence. …….
Prepared by ……..
Checked by ……..

(A) APPLICATION
I apply to be registered as the owner of the vehicle described below. I also apply for a licence for:- (tick one box)

☐ 4 months
or
☐ 12 months

Commencing 1 …… 20 ……
month

Date
Amount to pay
Registration Fee Sh. ……
Licence Fee Sh. …….
Total Sh. …….

(B) INSURANCE: Name of company issuing third Party isurance ……

3 ☐☐☐☐☐☐☐☐☐☐☐
1 2 3 4 5 6 7 8 9 10 11

(C) PARTICULARS OF VEHICLE: (tick or fill boxes where appropriate)

1. Motor vehicle ☐ Trailer ☐ Motorcycle ☐
2. Make ……
3. Body type…… (see Note 1 overleaf)
4. Other vehicle description ……
5. Year of manufacture 19……..
6. Tareweight ……..kgs
7. Manufacutres chasis or frame number

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28 29 30 31 32 33 34 35 36 37

8. Number of axles ……
9. Value K £ ……
10. Principal body colour (tick one bx only)

White/cream	☐	yellow/gold	☐
Red/maroon/pink	☐	brown/beige	☐
Orange	☐	black	☐
Blue/turquoise	☐	gray	☐
Green	☐	purple/violet	☐

11. Is it a new vehicle (see Note 2 overleaf) ? ☐ No ☐ Yes
12. Has the vehicle previously been registered ☐ No ☐ Yes
    If yes, Country ……
    And
    Registration mark/number ……..
13. Use: (a) Private ☐ (b) Commercial goods ☐ (c) Commercial public service ☐ } carrying capacity …… kgs
14. Expected normal location of vehicle: } seating ……
    …….. Road …… Area /Estate
    …….. Town …….. District
15. Motor vehicle only:
    (a) Method of propulsion (See Note 3 overleaf)
    Petrol ☐ Diesel ☐ Other oil ☐ Steam ☐ Electricity ☐
    (b) Engine Identification Number ☐☐☐☐☐☐☐☐☐☐
    59 60 61 62 63 64 65 66 67 68
    (c) Rating (cubic centimeters) ……..

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15 16 17 18
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19 20
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20 22
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23 24 25 26 27
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39 40 41 42 43
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48 49 50 51 52
☐☐☐☐☐
53 54 55 56 57
☐ 58
☐☐☐☐
69 70 71 72

(D) DECLARATION
I declare that the foregoing particulars are true and complete
Usual Signature ……..
Name (in full) ……
(Block Capital)
Occupation ……
Name of Institution /Company employed ……..
Telephone Number …….
Postal Address ……
Town ……..
Date……. 20 ……

Registration Mark and Number
☐☐☐☐☐☐☐ ☐
74/3 80/9

2 1 Registration Book No.
1 2 …….
10-35
36-51
52-71

☐☐ ☐ ☐☐☐☐☐☐
72 73 74 75 76 77 78 79 80
TN RC PREG