

Copy of records application



Kenya Revenue Authority

ROAD TRANSPORT DEPARTMENT

YOUR REF:.....

ADDRESS

TELEPHONE NO.....

DATE:.....

THE REGISTRAR OF MOTOR VEHICLES,
P.O. BOX 30440,
NAIROBI.

Dear Sir/Madam,

RE: MOTOR VEHICLE DETAILS REG. NO.

I/We would like to request for a copy of the registration details of the above vehicles
as per your records on the following

- i.
- ii.
- iii.
- iv.

for the purpose of

.....

Thanks

Signature

Receipt No