



STATE OF RHODE ISLAND

DIVISION OF MOTOR VEHICLES
DEALERS' LICENSE AND REGULATIONS OFFICE
600 New London Avenue, Cranston, RI 02920-3024
Phone: 401-462-5734 Fax: 401-462-5789 www.dmv.ri.gov

RHODE ISLAND LEASE / RENTAL MOTOR VEHICLE NAME CHANGE APPLICATION

1. You must obtain prior approval from the Dealer's License and Regulations Office before any name changes occur.
2. Owners, Partners or Corporate Officers of the present company must remain the same on the name change application or the change will be considered a first application.
3. Application must be completed in full, signed by a corporate officer, partner or sole owner and notarized.
4. If it is a Corporation name change: Copy of the Articles of Incorporation, copy of the minutes showing the elected officers, a copy of the Fictitious Name Report and a Letter of Good Standing issued by the Rhode Island Secretary of State whom you can contact at 401-222-3040, or www.sos.ri.gov, must be obtained.
5. Insurance form GU-1338 certificate must be filed with The Department of Financial Responsibility at the Division of Motor Vehicles, 600 New London Ave, Cranston RI 02920 stating the exact name to be licensed. If using a D/B/A name this should be the name appearing on the insurance certificate. Call 401-462-5813 with any questions.
6. You must contact the Rhode Island Division of Taxation, 401-574-8869 or 401-574-8895 at One Capitol Hill, Providence, RI 02908 to request copies of your tax permit which lists both your corporate name and d/b/a name.
7. A photograph, minimum size 3" x 3" of the permanently displayed sign stating the new name. The pictures must be submitted with the application.



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Please note that when the name change becomes effective in the computer system the name on all your current registrations will be changed to your new name in the computer system.

The name on the titles for the vehicles which you currently have will not be changed unless you submit an Application for Title (TR-2 / TR-9) which can be obtained online at dmv.ri.gov. This form must be submitted to the Rhode Island Division of Motor Vehicles, Research / Title Office, 600 New London Avenue, Cranston RI 02920. The fee is \$52.50 for each replacement title.

You will need to submit the current title along with the TR-1 application listing the new name, along with a check made out to the DMV. A new registration will be issued at that time.

If you have any questions, please contact the research / title department at 401-462-5774.

APPLICATION TO CHANGE LEASING / RENTAL NAME



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OFFICIAL USE ONLY

Date Received: _____

Date Approved: _____

Date Issued: _____

Inv.'s Signature: _____

LEASING / RENTAL MOTOR VEHICLE NAME CHANGE

Date: _____

License #: _____

License Year: FROM: _____ TO: December 31, 20_____

Current Company Name: _____

Current D/B/A Name: _____

New Company Name: _____

New D/B/A Name: _____

Principal Business Location: _____

Business phone: _____

Fax #: _____

Signature of Owner, Partner or
Corporate Officer

Print Name and Title

State of Rhode Island County of: _____

Subscribed and sworn to before me this _____ day of _____, 20_____

Notary Public Signature _____

Commission expires: _____