

RHODE ISLAND SPECIAL FINANCIAL RESPONSIBILITY INSURANCE CERTIFICATE

SEE INSTRUCTIONS FOR SUBMISSION ON BACK OF FORM

Name of Insured

Address

Current Policy No. Effective from

Year and Make of Vehicle Vehicle
Identification
Number

☐ All owned vehicles (complete for items 2,3, and 8 when the certification is on a blanket pass.)

Pursuant to the below designated Section of the Rhode Island General Laws, 1952 revision, as amended, the company signatory hereto certifies that it has issued to the above named insured a Policy of Insurance affording limits of liability as required by the applicable provisions of such law.

(Check whichever applicable)

1. ☐ Sec. 31-33-11 Minor-D.O.B.

2. ☐ Sec. 31-34-1 Lease and Rental Vehicles

3. ☐ Sec. 39-14-13 and 39-14.1 Taxicab, Public Motor Vehicle
and Limited Public Motor Vehicle

4. ☐ Sec. 5-38-4 Auto Body Shop

5. ☐ Sec. 31-33-13 Dealer Plates

6. ☐ Sec. 31-33-13 Bailee Plates

7. ☐ Sec. 31-33-13 In Transit Plates

8. ☐ Sec. 31-22-10.1 School Buses

9. ☐ Sec. 31-33-13 Transporters

10. ☐ Sec. 47-8-7 Fuel Delivery Vehicles

11. ☐ Sec. 31-10-38 Driving School

This certification is effective from and continues in effect until the certified policy is subsequently cancelled or terminated by the insurance carrier and a notice of cancellation or termination of the insurance so certified shall be filed by the insurance carrier, in the Division of Motor Vehicles, except that this certificate shall automatically expire in the case of a Minor's Certification (item 1 above), as of 12:01 A.M. on the date of said Minor's eighteenth birthday. A policy subsequently procured and certified shall, on the effective date of its certification, terminate the insurance previously certified with respect to any vehicle designated in both certificates.

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Name of Insurance Company

Date

By

Name of Authorized Representative

GU 1338f (08-25)

INSTRUCTIONS:

- If an individual owner or registrant specify last name first, followed by first and middle name.
- When filing pertains to a Minor (Owners between 16 and 18 years of age) date of birth in space designated "D.O.B." and all vehicle information must be complete.
- When filing pertains to Items 4, 5, 6, 7 and 9 there is no need to describe any specific vehicle and check the "All owned vehicles" block.
- Cancellation or Termination – Use AAMVA Uniform SR-26 “Notice of Cancellation or Termination” form for appropriate cancellation or termination of this certificate by showing an "X" in the box designated "Financial Responsibility Insurance Certificate – SR-22"
- **SUBMIT THIS FORM USING ONE OF THE METHODS BELOW:**
 - Fax: (401) 462-5805
 - Email: DMV.FinancialResponsibility@dmv.ri.gov
 - Mail: RI DMV, Attn: Financial Responsibility, 600 New London Avenue, Cranston, RI 02920