

STATE OF RHODE ISLAND DIVISION OF MOTOR VEHICLES 600 New London Avenue, Cranston, RI 02920-3024 www.dmv.ri.gov

Phone: 401-462-4368 www.dmv DMV.CustomerService@dmv.ri.gov

APPLICATION FOR LICENSE, **IDENTIFICATION CARD** AND PERMIT (LI-1)

USE BLACK OR BLUE INK ONLY

TRANSACTION TY	PE .						•FOR DMV USE	ONLY •		
REAL ID CREDENTIAL OPT-IN/OPT OUT BOX (Please select desired credential type)										
REAL ID CREDENTIAL NON REAL ID CREDENTIAL					ПСНЕ	☐ CHECK ☐ CASH ☐ CC AMOUNT:				
Note: Non REAL ID Credentials will have "NOT FOR FEDERAL IDENTIFICATION" on the card.					+	EYE TEST RESULTS				
LICENSE DENTIFICATION CARD (complete sections A, B, C, D, E*, F* G) NEW RENEW DUPLICATE DUT-OF-STATE UPDATE					WITH C	ATTESTATION FORM USED?YES				
PERMIT (complete sections A, B, C, D, E* , G					\vdash	RESULTS RESTRICTION				
□ NEW □ RENEW □ DUPLICATE □ UPDATE □						DENTITY				
COMPUTERIZED KNOWLEDGE EXAM (choose one language) ☐ ENGLISH ☐ SPANISH ☐ PORTUGUESE ☐ OTHER (INCLUDING ASL)						P.O.R. ONE				
** Pre-scheduled appointment required see website						P.O.R. TWO				
MOTORCYCLE LIC	ENSE (complete sections	A, B, C, D, G)				1-	S.S. CARD			
							OTHER			
A.APPLICANT'S IN	IFORMATION (COM	/IPLETE ALL	FIELD	S)						
LAST NAME:			IRST NAME:			MIDDLE	MIDDLE NAME:		SUFFIX:	
DATE OF BIRTH: (MM/DD/YY) GENDER: M F X SOCIAL SECURITY NUMBER: RI DRIVER'S LICENSE # / R.I. ID #			ER'S LICENSE # / R.I. ID # / PER	PERMIT #:						
EMAIL ADDRESS:										
STREET ADDRESS: RESIDEN	STREET ADDRESS: RESIDENCE ADDRESS APT/UNIT # or FLOOR: CITY / TOWN: STATE:					STATE:	ZIP CODE:			
MAILING ADDRESS (IF DIFFERENT FROM RESIDENCE) APT/UNIT # or FLOOR:				NIT # or FLOOR:	CITY / TOW	ITY / TOWN: STATE:		ZIP CODE:		
TELEPHONE: ACTIVE MILITARY: 100% DISABLED VETERAN: VETERAN DESIGNATION: () YES NO YES NO YES STATING "HONORABLE DISCHARGE"						□NO				
,	H (COMPLETE ALL F		JNO		IL3 NO		STATING "HONORABLI	E DISCHARGE")		
COUNTRY	1 (COMPLETE ALL P	TELDS	STATE	/ PROV	/INCE	CITY				
				, -						
C.PHYSICAL INFORMATION (COMPLETE ALL FIELDS)										
HEIGHT: FT./IN.	WEIGHT: LBS.	EYE COLOR: (d	check o	ne)			HAIR COLOR:(check one)			
							LD			
D CENTERAL OUT	TIONS (COMPLETE	BLUE	PII	NK	HAZEL		BLONDE RED	GRA	(
D.GENERAL QUES	TIONS (COMPLETE	ALL FIELDS)						Ι	
1.Are you a U.S. citizer									L YES	□NO
2.Do you want to register (or continue to be registered) as an Organ and Tissue Donor? (If you are currently registered as an organ and tissue donor, you will remain registered only if you choose YES every time.) Visit donatelifenewengland.org for more information.							☐ YES	□NO		
3.We will use your information to update your voter registration or register you to vote. Party:										
Do not use my information for voter registration. (Your decision not to register to vote is confidential. If you register, the place where you register is										
confidential.) If you are under age 16, you will not be registered to vote. If you are at least age 16, you will be pre-registered to vote. (You must be at least age 18 to vote.) If you are registering to vote. Please SIGN below:										
I swear or affirm that:										
	, , ,						ed in a correction facility upon best of my knowledge under			
provided false information, I may be fined imprisoned, or (if not a U.S. citizen) deported from or refused entry into the United States.										
5. Do you wear contacts/glasses for driving?							— Тпао			
6. I acknowledge that receiving a Rhode Island Permit, License or ID card may cancel or invalidate any Permit, License or ID Card from another state per the										
laws of that state. Customer must initial the line to the right of this statement to acknowledge that they have read this statement. Please sign initials on the										
IF YOU ARE TRANSFERRI	NG A LICENSE FROM AND			COMPLE					INITIAL	. HERE
STATE:	LIC. #:	EXP.	:		ENDORSEMENT	S:	RESTRICTIONS:			

NOTICE TO MALES 18 TO 26 YEARS OF AGE:

Pursuant to RI Gen. Laws 31-10-47(a), "(a) ny male, United States citizen or immigrant who is at least eighteen (18) years of age, but less than twenty-six (26) years of age shall be registered in compliance with the requirements of section 3 of the "Military Selective Service Act", 50 U.S.C. App. 451 et seq., when applying to receive a driver's license, renewal or identification card or renewal." Pursuant to RI Gen. Laws 31-10-47(b), the applicant recognizes that by submitting this application he is consenting to registration with the Selective Service system, if so required by federal law.

NOTE: IF LICENSE, ID OR PERMIT IS LOST, PLEASE COMPLETE "SECTION E" BELOW. E*. AFFIDAVIT OF LOST LICENSE, LOST ID OR LOST PERMIT (COMPLETE ONLY IF LOST PERMIT, LICENSE OR ID) I, THE UNDERSIGNED, DECLARE UNDER PENALTY OF PERJURY THAT THE RHODE ISLAND LICENSE, IDENTIFICATION CARD OR PERMIT ISSUED TO ME WAS LOST, DESTROYED OR STOLEN, IF THE RHODE ISLAND LICENSE, IDENTIFICATION CARD OR PERMIT AGAIN COMES INTO MY POSSESSION, I WILL IMMEDIATELY RETURN THE SAME TO THE DIVISION OF MOTOR VEHICLES. DATE: (MM/DD/YY) APPLICANT'S SIGNATURE: *. VOLUNTARY TERMINATION OF A LICENSE AFFIDAVIT (COMPLETE ONLY IF SURRENDERING YOUR RI LICENSE) PLEASE ACCEPT THIS ATTACHED LICENSE FOR TERMINATION UNDER THE AUTHORITY OF THE STATE STATUTES REGARDING VOLUNTARY TERMINATION . MY REASON FOR REQUESTING TERMINATION ON A VOLUNTARY BASIS IS: _ I AM MAKING THIS REQUEST ON BEHALF OF MYSELF AND HEREBY ACKNOWLEDGE THE FOLLOWING: (a) A RECORD OF THIS TRANSACTION WILL BE ENTERED INTO A LICENSE FILE AS A VOLUNTARY SURRENDER. (b) I WILL BE PRECLUDED UNDER LAW FROM MAKING APPLICATION FOR ANOTHER LICENSE/PERMIT TO OPERATE FOR A PERIOD OF: OPERATOR'S LICENSE = 6 MONTHS CHAUFFFUR'S LICENSF = 1 YEAR (c) PRIOR TO ANOTHER LICENSE BEING ISSUED, WRITTEN AND ROAD EXAMINATIONS WILL BE REQUIRED. (d) AFTER THIS VOLUNTARY TERMINATION, I WILL BE REQUIRED TO PAY ALL REQUIRED LICENSING FEES IF APPLICATION IS MADE FORANOTHER LICENSE. NOTE: TERMINATION WILL NOT BE PROCESSED WITHOUT LICENSE OR AFFIDAVIT COMPLETED. LICENSE#: **EXPIRATION DATE:** LICENSE PHYSICALLY SURRENDERED? DATE: (MM/DD/YYYY) APPLICANT'S SIGNATURE: **G. SIGNATURE** EXCEPT AS AUTHORIZED BY LAW, THE DMV WILL NOT DISCLOSE PERSONAL INFORMATION WITHOUT YOUR CONSENT. DO YOU CONSENT TO SUCH DISCLOSURE? YES NO I. THE UNDERSIGNED, HEREBY MAKE APPLICATION FOR EITHER A LICENSE, STATE IDENTIFICATION CARD OR PERMIT AND DECLARE UNDER PENALTY OF PERJURY THAT ALL STATEMENTS MADE ON THIS APPLICATION ARE TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND BELIEF. THE UNDERSIGNED (HEREINAFTER REFERRED TO AS "APPLICANT") SWEARS THAT, UNDER PENALTY OF PERJURY THAT I HAVE READ THE AFFIDAVIT OF COMPLIANCE FOR COMPULSARY INSURANCE AND IN COMPLIANCE WITH TITLE 31, CHAPTER 47 OF THE GENERAL LAWS, MOTOR AND OTHER VEHICLES, KNOWN AS THE MOTOR VEHICLE REPARA TIONS ACT, HE/SHE WILL NOT OPERATE OR BE ALLOWED TO OPERATE THE MOTOR VEHICLE DESCRIBED IN THE REGISTRATION NOR OTHER MOTOR VEHICLE UNLESS ALL SUCH MOTOR VEHICLES ARE COVERED FOR FINANCIAL SECURITY. PENALTIES FOR FAILURE TO COMPLY WITH PROVISIONS OF THE ACT MAY RESULT IN FINES AND/OR SUSPENSION OF LICENSE AND REGISTRATION. WARNING! IF YOU SIGN THIS FORM AND KNW IT TO BE FALSE, YOU CAN BE CONVICTED AND FINED UP TO \$5,000 OR JAILED UP TO 10 YEARS APPLICANT'S SIGNATURE: MINO R LAW CHAPTER 31-10 OF THE GENERAL LAWS OF RHODE ISLAND, 1956 AS AMENDED. CERTIFICATION BY PARENT(S) OR SUCH RESPONSIBLE PERSON AS INDICATED IN CHAPTER § 31-10 FOR A MINOR UNDER 18 YEARS OF AGE IF A MINOR IS APPLYING FOR A PERMIT, COMPUTERIZED KNOWLEDGE EXAM, OR FIRST LICENSE, THE APPLICATION MUST BE SIGNED BY A PARENT, LEGAL GUARDIAN, LICENSED FOSTER PARENT, OR RESPONSIBLE ADULT. IF THERE IS NO QUALIFIED PARENT, LEGAL GUARDIAN, OR LICENSED FOSTER PARENT, ANOTHER RESPONSIBLE ADULT WILLING TO ASSUME THE OBLIGATION IMPOSED UNDER \$31-10-1 -31-10-33 MAY SIGN, IN THE EVENT THE PARENT, LEGAL GUARDIAN, LICENSED FOSTER PARENT, OR RESPONSIBLE ADULT IS NOT PRESENT AT THE TIME THE APPLICATION IS SUBMITTED TO THE DMV, THEN THE SIGNATURE ON THE FORM WILL ONLY BE ACCEPTED IF NOTARIZED. COURT PAPERS OR APPROPRIATE DOCUMENTATION MUST BE PRESENTED TO THE DMV WHEN A LEGAL GUARDIAN OR LICENSED FOSTER PARENT IS SIGNING FOR A MINOR. IF RI NOTARY, STAMP MUST BE INK AND NOT EMBOSSED State of **Rhode Island** County of _____ On this ______ day of ______, 20 _____, before me the undersigned notary public, personally appeared (name of document signer) and proved through satisfactory evidence of identification to be the person whose name is signed on the attached document in my presence MOTHER'S/FATHER'S/GUARDIAN'S SIGNATURE: NOTARY PUBLIC SIGNATURE: NOTARY PUBLIC PRINTED NAME: DATF: COMMISSION STATE (MANDATORY): COMMISSION EXPIRATION DATE (MANDATORY): NOTARY ID# **NOTARY STAMP:** FOR ENFORCEMENT OFFICE ONLY □ IDENTITY _______ P.O.R. ONE _______ STAMP □ P.O.R. TWO _____ □ S.S. CARD _____ OTHER DMV OFFICIAL _____

NOTE: ALL REAL ID LICENSE AND ID TRANSACTIONS REQUIRE A COMPLETED LI-1 OR CDL-1 FORM AND THE CORRECT NUMBER OF REQUIRED DOCUMENTS LISTED BELOW

		REQUIRED DOCUM	MENTS LISTED BELOW				
New Permit LI-1 form A certified government birth certificate (not a copy) or Proof of Identity Document (see list). Driver Education Certificate (if under 18) 1	☐ Origina indicati	rm t RI license or Identification card il government issued document ng name change (ex. Marriage	RI License/ID/Permit Renewal or Duplicate LI-1 form One identity document (see list) All non-U.S. citizens <i>must</i> bring all	Out-of-State Transfer LI-1 form A certified government birth certificate (not a copy) or Proof of Identity Document (see list) Your current license from the other state Two (2) Proof of residency (see list)			
- If you have a Driver Ed certificate, that has not been approved by CCRI, you must take the knowledge exam. ☐ Social Security Number must be written on LI-1 ☐ Two (2) Proof of residency (see list) ¹ If under 18 years of age and applying for a learner's permit, the LI-1 form must be notarized if	License/Certificate from government or Divorce Decree) Please note you must wait 24 hours for name change to register with the Social Security Administration) New ID LI-1 form A certified government birth certificate (not a copy) or Proof of Identity Document (see list) Two (2) Proof of residency (see list) Social Security Number must be written on LI-1		supporting documents to be reviewed. Address Change LI-1 form/ change of address form Current RI license or Identification card Gender Change	dated within 30 days in addition to your current license. Motorcycle License			
parent/guardian is not present. American Sign Language (ASL) computerized permit exams or selected foreign language permit exams (please refer to DMV website for details) require a pre-scheduled appointment.			☐ LI-1 form ☐ Gender Designation form				
Proof of Identity Documents Lis You must present one (1). These must be applicant's legal name and date of be	ear the irth.	☐ A utility bill (gas, electric, telepho		ses will not be accepted. phone) with the address of residence clearly stated in the			
Proof of a change to the name contained on a applicant's primary identity document must be demonstrated with a document issued by an aut government agency. ORIGINAL DOCUMENTS ONLY – NO PHOTO □ A valid, unexpired U.S. passport* □ A certified copy of a birth certificate filed w State Office of Vital Statistics or equivalent agen individual's State of birth; □ A Consular Report of Birth Abroad (CRBA by the U.S. Department of State, Form DS-1350 or FS-545;	copies with a cy in the	applicant's name or in the name of a member of the applicant's immediate family dated within the past sixty (60) days; A personal check or bank statement with the applicant's name and address of residence dated within the past sixty (60) days; A payroll check with the applicant's name and address of residence dated within the past sixty (60) days; A lease agreement currently in effect. The lease agreement must contain the applicant's name and address of residence and the landlord's name, and address. Handwritten lease agreements will not be accepted; A letter issued by a Rhode Island state agency or a federal agency with the applicant's name and address of residence dated within the past sixty (60) days; A homeowner's or renter's insurance policy for the applicant's home or apartment with the applicant's name and address of residence that is currently in effect; An automobile insurance policy for the applicant's motor vehicle with the applicant's name and address of residence that is currently in effect;					
□ A valid, unexpired Permanent Resident Card (Form I-551) issued by DHS or INS; □ An unexpired Employment Authorization Do (EAD) issued by DHS, Form I-766 or Form I-688: □ An unexpired foreign passport with a valid unexpired U.S. visa affixed accompanied by the approved I-94 form documenting the applicant's recent admittance into the U.S.; □ A Certificate of Naturalization issued by DHS	ocument 3; most	 A property tax bill for the applicant's residence from the immediately preceding year; A letter from a Rhode Island shelter or halfway house indicating that the applicant resides at the facility. Such a letter must be on letterhead, must be dated within the past thirty (30) days and must include the name and contact information of an administrator of the shelter or halfway house; or A jury duty summons dated within the past sixty (60) days; A W-2 form with the applicant's name and address of residence from the immediately preceding year; An installment loan contract (automobile, student loan) with the applicant's name and address of residence that is currently in effect; A current Social Security Administration statement with the applicant's name and address of residence; A current pension or retirement account statement with the applicant's name and address of residence; A Rhode Island-issued firearms permit with the applicant's name and address if residence that is currently in effect; or A valid Rhode Island driver's license or identification card; If the applicant is a minor, in addition to any of the proof of residency documents listed above, the following are accepted: A school record from the current school year (report card, diploma, transcript, or ID card) stating the student's address of residence (past year if during summer vacation) The Rhode Island driver's license or identification card of the individual signing the minor's application. Note: All U.S. Territories driver's license transfers are only done at the DMV Cranston Headquarters with approval from Enforcement. These transactions are not performed at any DMV or AAA branch office. 					
N-550 or Form N-570; or A Certificate of Citizenship, Form N-560 or FN-561, issued by DHS. *If you have obtained or renewed your passp within the last 6 months, please bring an ad Identity Document, as your passport may nowith the national database.	ort ditional						

Rhode Island DMV –Document Checklist	NON REAL ID LICENSI	E & ID CARDS Note: Non REAL ID Cred	destriction of the second				
□ LI-1 form □ A certified government birth certificate (not a copy) or Proof of Identity Document (see list). □ Driver Education Certificate (if under 18) ¹ - If you have a Driver Ed Certificate, that has not been approved by CCRI, you must take the knowledge exam. □ Social Security Number must be written on LI-1 □ Two (2) Proof of residency (see list) ¹ If under 18 years of age and applying for a learner's permit, the LI-1 form must be notarized if parent/guardian is not present. American Sign Language (ASL) computerized permit exams or selected foreign language permit exams (please refer to DMV website for details) require a pre-scheduled	Name Change □ LI-1 form □ Current RI license or Identification of Original government issued docum indicating name change (ex. Marri License/Certificate from government or Divorce Decree) □ Please note you must wait 24 hou name change to register with the Sescurity Administration) New ID □ LI-1 form □ A certified government birth certificate copy) or Proof of Identity Document of Two (2) Proof of residency (see list) □ Social Security Number must be writh	All non-U.S. citizens must bring al supporting documents to be review Address Change LI-1 form/change of address form Current RI License or Identification Gender Change LI-1 form Gender Designation form Current RI License or Identification	*If the out-of-state license is not available at time of transfer you must submit a driving record or verification from the other state with an Identity Document (see list). US territory drivers must supply a certified drivers record dated within 30 days in addition to your current license. Motorcycle License LI-1 form Certificate of completion from the RI Motorcycle Safety Course				
Proof of Identity Documents List You must present one (1). These must bea applicant's legal name and date of birth Proof of a change to the name contained on the applicant's primary identity document must be demonstrated with a document issued by an author government agency. ORIGINAL DOCUMENTS ONLY – NO PHOTOCO A valid, unexpired U.S. passport; A certified copy of a birth certificate filed with a State Of Vital Statistics or equivalent agency in the individual's statistics or e	A utility bill (gas, electric applicant's name or in the Derized A personal check or base or ized A payroll check with the A lease agreement curname, and address. Handwritten lease agreement curname, and addre	e name of a member of the applicant's immediate ank statement with the applicant's name and address of residence data applicant applicant applicant applicant's home of the applicant's for the applicant's home of the applicant's residence from the immediately precipled applicant's residence from the immediately precipled applicant's residence from the immediately precipled applicant applicant applicant applicant's name and address of residence from the importract (automobile, student loan) with the applicant applicant applicant applicant account statement with the applicant applicant applicant applicant applicant applicant applicant account statement with the applicant a	Are cell phone) with the address of residence clearly stated in the family dated within the past sixty (60) days; ess of residence dated within the past sixty (60) days; ed within the past sixty(60) days; the applicant's name and address of residence and the landlord's of the applicant's name and address of residence dated within are apartment with the applicant's name and address of residence that is currently in the applicant resides at the facility. Such a letter must be on the name and address of residence that is currently in the applicant resides at the facility. Such a letter must be on the name and contact information of an administrator of the shelter of the shelter and address of residence; hame and address of residence; the applicant resides at the facility in effect; or the shelter of the shel				
 A valid Canadian Driver's License with photograph, sign and date of birth (must not be expired for more than five ye An employment authorization document (EAD) issued Form I-766, that indicates a grant of deferred action Deferred Action for Childhood Arrivals (DACA) Program. 	nature, ears); or d by DHS, Fnforcement These tran	☐ The Rhode Island driver's license or identification card of the individual signing the minor's application. Note: All U.S. Territories driver's license transfers are only done at the DMV Cranston Headquarters with approval from Enforcement. These transactions are not performed at any DMV or AAA branch office.					