



STATE OF RHODE ISLAND

**DIVISION OF MOTOR VEHICLES
ENFORCEMENT OFFICE**

600 New London Avenue
Cranston, RI 02920-3024

Phone: 401-462-5736 Fax: 401-462-5789

www.dmv.ri.gov

APPLICATION FOR TRANSPORTER PLATES

COMPANY NAME: _____

NUMBER & STREET: _____

CITY/STATE/ZIP: _____

TELEPHONE: _____

OWNERSHIP: Individual Partnership Corporation

NAMES/ADDRESSES OF OFFICERS OF FIRM:

TYPE OF BUSINESS (give brief description): _____

Section §31-3-21 (c) of the General Laws of the State of Rhode Island provides for transporter plates. A transporter may operate or move any vehicle of a type otherwise required to be registered under this chapter upon the highway solely for the purpose of delivering, upon displaying on the vehicle the plates issued to him or her as provided in Sections §31-3-23 through §31-3-25, inclusive.

Transporter is defined in section §31-1-19 (j). "Transporter" means every person engaged in the business of delivering vehicles required to be registered under chapter 3 of this title from a manufacturing, assembling, and distributing plant to a point of destination or for the purpose of weighing, testing, transporting, or delivering that vehicle, or for the purpose of moving that vehicle in connection with making installations on or improvements to it, or for repossession of or foreclosure of it.

Section §31-6-12 (8) Fees for transporter. For transporter registration number plates and a transporter certificate, thirty dollars (\$30.00) if the transporter operates not more than three (3) motor vehicles, trailers, or semi-trailers at any one time, and ten dollars (\$10.00) plus the cost of number plates for every motor vehicle, trailer, or semi-trailer in excess of three (3) motor vehicles, trailers or semi-trailers.

Section §31-33-13. The division of motor vehicles shall not issue a registration under the provisions of sections §31-3-20 through §31-3-27, inclusive, until the person applying for the registration shall furnish proof of financial responsibility.

Signature: _____ Date: _____

SEE REVERSE SIDE FOR INSTRUCTIONS FOR APPLICATION FOR TRANSPORTER PLATES

Official Use Only

Investigator Assigned: _____ Date: _____

of Plates Approved: _____ Reviewed/Approved by: _____

INSTRUCTIONS FOR APPLICATION FOR TRANSPORTER PLATES

The following must be provided with this application:

1. Photo of building showing business sign, name, address and phone number.
2. Lease agreement issued to business or copy of deed if property is owned by business.
3. Copy of city or town license or a letter from zoning approval for business to operate in this location.
4. Three (3) written references from businesses you do business with on their letterhead, signed by owner or manager.
5. Copy of Sales Tax Certificate.

Upon approval of plate you must do the following:

Contact your insurance agency to obtain insurance coverage for the plate you requested. Insurance form GU 1338. Have your insurance company forward original copies of the insurance information to:

**Division of Motor Vehicles
Financial Responsibility
600 New London Avenue
Cranston, RI 02920-3024**

IMPORTANT

PRIOR TO REPORTING TO THE MAIN REGISTRY, MAKE SURE YOUR INSURANCE INFORMATION IS ON FILE WITH FINANCIAL RESPONSIBILITY.

Contact Financial Responsibility at 401-462-5747 to verify that they have received your insurance information.

If Financial Responsibility has received your insurance information, report to the Enforcement Department at the Cranston Registry to complete form TR-1. This form is required in order to register your plate. You will be able to obtain your plate upon completing form TR-1.

If Financial Responsibility HAS NOT received your insurance information, please DO NOT REPORT to the Cranston Registry.