STATE OF RHODE ISLAND



DIVISION OF MOTOR VEHICLESCOMMERCIAL DRIVER'S LICENSE OFFICE

600 New London Avenue Cranston, RI 02920-3024

Phone: 401-462-4368 www.dmv.ri.gov

SELF-CERTIFICATION FOR A COMMERCIAL DRIVER'S LICENSE

	Name:					
R.I. Lice	ense Number:					
	Date of Birth:					
Reside	ence Address:	NUMBER AND STREET	CITY/TOWN	STATE	ZIP CODE	
NOTE:	ALL CDL HO	LDERS MUST SELF-C	ERTIFY PRIOR TO JANUARY	<u>′ 31, 2014</u>		
			ou operate in. You must certificommerce you operate in as I		of Motor	
(Choose	e one)					
1. 🗌	Interstate non-excepted: You are an Interstate non-excepted driver and must meet the Federal DOT medical card requirements (e.g. – you are "not excepted").					
2. 🗌	Interstate excepted: You are an Interstate excepted driver and $\underline{\text{do not}}$ have to meet the Federal DOT medical card requirements.					
3.		ntrastate non-excepted: You are an Intrastate non-excepted driver and are required to meet ne medical requirements for your State.				
4.		cepted: You are an Intra for your State.	astate excepted driver and <u>do</u>	not have to meet	the medical	
•	•		uirements, please provide a ne piration of the current DOT me		card to	
Signatu	ıre:		Da	ate:		