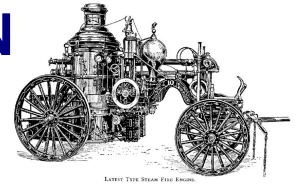




# RHODE ISLAND ASSOCIATION OF FIRE CHIEFS, INC.

*Incorporated November 6, 1967*



## Firefighter License Plate Chiefs letter and plate procurement procedures

You must have this letter certified by the chief of the fire department stating that you are currently a member of that department with at least one year of active service or retired under honorable conditions.

At this time the plate is available as a passenger plate only with five characters or less. If you are currently assigned a six-digit plate they will reassign you a five digit.

The cost is \$31.50 and must be sent in or presented along with this letter signed by the Chief and the "Application for Remake and Vanity License Plates" (form available on the RIAFC website and the registry website)

Date \_\_\_\_\_

To: Rhode Island Registry of Motor Vehicles

In accordance with RIGL Section 31-3-17.4, Firefighter Plates, I hereby certify that  
(name) \_\_\_\_\_

(check one)

\_\_\_\_\_ is an active member of the \_\_\_\_\_ Fire Department, having served a minimum of one year of active service.

\_\_\_\_\_ is retired under honorable conditions as a firefighter with the \_\_\_\_\_ Fire Department, having served a minimum of one year of active service.

\_\_\_\_\_ is no longer in good standing or affiliated with the \_\_\_\_\_ Fire Department.

Plate Number \_\_\_\_\_ (you will receive the same plate number you have now unless your current plate exceeds five digits.)

Mail this letter, and the Application for Remake and Vanity Plates form, along with the check or money order for \$31.50 to the to the Registry of Motor Vehicles, Plate Department, 600 New London Ave., Cranston, RI 02920-3024. You will be notified by mail to pick up your plates at the Registry location that you chose on the "Application for Remake and Vanity Plates" form.

Fire Chief/Fire Chief designee signature;

name \_\_\_\_\_ department \_\_\_\_\_

State of Rhode Island – Division of Motor Vehicles  
 Attn: Plate Department  
 600 New London Avenue  
 Cranston RI 02920-3024  
 www.dmv.ri.gov

**Application for Remake and Vanity License Plates**

PLEASE USE BLUE OR BLACK INK ONLY

1. PLATE OWNER <i>(Please print true full name of plate owner)</i>			
LAST NAME(or Business Name)	FIRST NAME	MIDDLE NAME	
MAILING ADDRESS	CITY	STATE <b>RI</b>	ZIP CODE
EMAIL ADDRESS	HOME PHONE (    )	CID (employees only)	

2. PLATE TYPE ORDER:	
<input type="checkbox"/> Passenger <input type="checkbox"/> Commercial <input type="checkbox"/> Trailer <input type="checkbox"/> Motorcycle <input type="checkbox"/> Camper <input type="checkbox"/> Veteran <input type="checkbox"/> Fire Fighter <input type="checkbox"/> Other	
CURRENT LICENSE PLATE NUMBER	PLATE TYPE <i>(passenger, commercial, motorcycle, etc)</i>

3. TYPE OF ORDER:	VANITY ORDERS	PLATE SELECTION						
I want to:	<u>OPTIONS</u>	<u>FILL IN PLATE LETTERS</u>						
<input type="checkbox"/> <b>Remake Current Plate</b>  <hr style="width: 100%;"/> <i>(current plate number)</i>	2-6 LETTERS AND NO NUMBERS OR 3-5 LETTERS AND 1 NUMBER OR 3-4 LETTERS AND 2 NUMBERS OR 3 LETTERS AND 3 NUMBERS	<table border="1" style="width: 100%; height: 20px; margin-bottom: 5px;"> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> </table> FIRST CHOICE						
	* MOTORCYCLE AND COMMERCIAL VANITY 5 CHARACTERS MAX	<table border="1" style="width: 100%; height: 20px; margin-bottom: 5px;"> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> </table> SECOND CHOICE						
	<table border="1" style="width: 100%; height: 20px; margin-bottom: 5px;"> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> </table> CURRENT PLATE							
	<table border="1" style="width: 100%; height: 20px;"> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> </table>							

4. NON-CHARITABLE PLATES ORDERS. I WANT TO CHANGE MY PLATE DESIGN TO: <i>(See fee chart at www.dmv.ri.gov)</i>
<input type="checkbox"/> Wave <i>(passenger, commercial)</i> <input type="checkbox"/> Sailboat <i>(passenger &amp; commercial)</i>

5. PLEASE SELECT LOCATION FOR PLATE PICK UP:
<b>Pickup Location</b> <i>(please check only one)</i> <input type="checkbox"/> Cranston <input type="checkbox"/> Middletown <input type="checkbox"/> Wakefield <input type="checkbox"/> Warren <input type="checkbox"/> Woonsocket

6. SIGNATURE REQUIRED FOR ALL APPLICANTS:		
<i>I certify (or declare) under penalty of perjury under laws of Rhode Island, that the foregoing is true and correct.</i>		
Signature	Date (mm/dd/yyyy)	Daytime phone number (    )    -

Please enclose check or money order payable to RI DMV in the amount of \$ \_\_\_\_\_ . \_\_\_\_\_ *(See fee chart at www.dmv.ri.gov)*