



Inspection Exemption - Out-of State Vehicle

This form is used to verify that your vehicle or equipment is out-of-state, and will miss its required vehicle inspection. Please type or print all requested information. Forms not accompanied by satisfactory proof will be rejected.

Be sure to complete sections 1 - 4 below before submitting this form for approval.

1. Vehicle Info:		*** DMV Use Only ***	
Year/Make/Model: _____	Registration Number / Type: _____	Approved By: _____	
V.I.N.: _____		Date Approved: _____	
2. Vehicle Owner:		New Deadline Date: _____	
Owner Name: _____		<u>Rejection Reason:</u>	
Address: _____		_____	
City, State, Zip: _____		_____	
Out-of-State Mailing Address: _____		_____	
City, State, Zip: _____		_____	
Phone #: _____ Email Address: _____		_____	
3. Justification for Exemption:			
Must check one	<input type="checkbox"/> I hereby certify that the above vehicle or equipment has passed the inspection required by the jurisdiction in which the vehicle is currently domiciled. As proof, I have attached a copy of my passing inspection receipt. (Note: For commercial vehicles, check this box and attach a copy of an FMCSA / "DOT" Inspection Form or FMCSA / "DOT" equivalent state inspection.)		
	<input type="checkbox"/> I hereby certify that the jurisdiction in which the above vehicle or equipment is currently domiciled lacks an inspection program or does not inspect vehicles registered in other jurisdictions.		
I hereby certify that I am temporarily residing in another jurisdiction because I am:		Expected Return to RI Date: _____	
<input type="checkbox"/> A student <input type="checkbox"/> In military service <input type="checkbox"/> A seasonal resident <input type="checkbox"/> Other			
Within five (5) days of being returned to Rhode Island, the vehicle or equipment identified on this form must have a vehicle inspection performed by a Rhode Island Vehicle Inspection Station, as required by law. I swear, under the penalties of perjury, that to the best of my knowledge the statements I have made herein are accurate, and I agree to abide by the laws and regulations set forth by the State of Rhode Island.			
Vehicle Owner's Signature: _____		Date: _____	

*** Please clearly print the address where this form can be mailed back to you in the receipt section at the bottom of this form. When approved, it will be returned to you, you must then keep the approval with the vehicle and registration. ***



Out-of-State Inspection Verification and Approval

(Keep this receipt with your registration until inspected in Rhode Island.)

Section 4
Plate Number _____ Plate Type _____ VIN: _____ ↓↓ Please clearly print your name address where this form can be mailed back to you on the lines below. ↓↓ _____ _____ _____

DMV Validation and Approval

Expires the earlier of the last day of the month one year from date stamped above OR five days from being returned to operation on the roads of the State of Rhode Island.