



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Department of Administration
DIVISION OF TAXATION
One Capitol Hill
Providence, RI 02908-5800

AFFIDAVIT

I _____ certify that
NAME OF INDIVIDUAL

_____ is a sole proprietorship and not a
COMPANY NAME

corporation or partnership. Accordingly, the transfer / sale of the following vehicle:

YEAR MAKE MODEL VIN

From INDIVIDUAL / SOLE PROPREITORSHIP (please CIRCLE ONE)

To INDIVIDUAL / SOLE PROPREITORSHIP (please CIRCLE ONE)

is exempt from Rhode Island SALES / USE TAX.

Signed under penalty of perjury on this _____ day of _____, 20 _____.

SIGNATURE