STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

DIVISION OF MOTOR VEHICLES
100 Main Street
Pawtucket, RI 02860

REFUND APPLICATION

DATE_____

TO WHOM IT MAY CONCERN:

APPLICATION IS HEREBY MADE FOR A REFUND IN THE AMOUNT OF $_____, WHICH WAS SUBMITTED TO THE DIVISION OF MOTOR VEHICLES FOR PAYMENT OF LICENSE OR REGISTRATION FEE/S.

REGISTRATION PLATE NUMBER: _____

LICENSE NUMBER: _____

THIS REQUEST IS BEING MADE FOR THE FOLLOWING REASON:

(BRIEFLY STATE WHY A REFUND IS DUE)_____

_____

_____

SIGNATURE _____

PLEASE PRINT: NAME _____

CURRENT ADDRESS _____

_____

SUBSCRIBED AND SWORN TO BEFORE ME THIS _____ DAY OF

_____, _____.

NOTARY PUBLIC _____