



TEMPORARY CHANGE OF MAILING ADDRESS MOTOR VEHICLE

COMPLETION OF THIS FORM WILL TEMPORARILY CHANGE THE MAILING ADDRESS FOR MOTOR VEHICLE EXCISE TAXES SENT FROM THE CITY OF CRANSTON. THE NEW ADDRESS INFORMATION MUST STILL BE PROVIDED TO THE RHODE ISLAND DEPARTMENT OF MOTOR VEHICLES IN ORDER FOR LICENSE AND VEHICLE REGISTRATIONS TO BE UPDATED. CONTACT THE RI DMV (401-462-4368, <http://www.dmv.ri.gov>) FOR ADDITIONAL ASSISTANCE.

PLEASE PRINT CLEARLY

RETURN FORM TO: 869 PARK AVE, CRANSTON, RI 02910

NAME OF VEHICLE OWNER: _____

OWNER'S DATE OF BIRTH: ____/____/____

PHONE NUMBER: _____

ADDRESS ON REGISTRATION (OLD ADDRESS): _____

NEW MAILING ADDRESS: _____

VEHICLE INFORMATION:

YEAR(S): _____

MAKE(S): _____

PLATE(S): _____

PRINTED NAME: _____

SIGNATURE: _____

TODAY'S DATE: ____/____/____

LICENSE STATE: _____ LICENSE NUMBER: _____

LICENSE EXPIRATION: ____/____/____ PHONE NUMBER: _____