FLASHING LIGHT PERMIT APPLICATION

STATE OF RHODE ISLAND -- DIVISION OF MOTOR VEHICLES
600 New London Avenue ,Cranston, RI 02920-3024
www.dmv.ri.gov

In order to process this application, please fill out the requested information and submit a copy of the registration and a personal check or money order for $26.50 made payable to the Division of Motor Vehicles.

Application is hereby made to the administrator of the Division of Motor Vehicles for permission to equip and use the following device(s):

RED	☐	AMBULANCES
AMBER	☐	WRECKER TRUCKS, SERVICE STATION TRUCKS, STATE AND TOWN SNOWPLOWS AND TRACTORS, LIGHT COMPANY TRUCKS, TELEPHONE COMPANY TRUCKS, WATER COMPANY TRUCKS AND OTHER UTILITY TRUCKS, VEHICLES OF TELEVISION, RADIO AND PRESS PHOTOGRAPHERS, RURAL MAIL CARRIERS AND ALL MOTOR PROPELLED VEHICLES OWNED BY THE NORTHERN RHODE ISLAND REACT (RADIO EMERGENCY ASSOCIATION CITIZEN TEAM) WHEN ON OFFICIAL BUSINESS.

REGISTERED OWNER'S INFORMATION

NAME: _____

STREET: _____

CITY/STATE/ZIP: _____

REGISTRATION #: _____

YEAR/MAKE: _____

VIN #: _____

Location of light on vehicle: ☐ Roof ☐ Window ☐ Other _____

Vehicle will be used for: ☐ Snow Removal ☐ Ambulance
☐ Municipal Emergency ☐ Public Service
☐ Other (please explain) _____

I hereby declare that the above information is true and I agree to immediately surrender this permit to the Division of Motor Vehicles when the above vehicle ceases to be an emergency vehicle or is sold or transferred by me.

It is understood that this permit may be suspended or cancelled by the administrator of the Division of Motor Vehicles or his/her authorized agent when any of the terms under which the permit is issued are violated.

Signature of Applicant: _____ Date: _____

For Official Use Only

Approved/Denied by: _____ Date: _____

Permit Issued by: _____ Sticker #: _____