



NOTE: All CDL drivers must provide original proof of status as a U.S. Citizen or Lawful Permanent Resident when doing any transaction beginning April 1, 2016.

Transaction Type (Select One)	License Class Information (Select Applicable Areas)	
WHICH OF THE FOLLOWING ARE YOU APPLYING FOR: <input type="checkbox"/> PERMIT (CLP) <input type="checkbox"/> LICENSE (CDL) <input type="checkbox"/> CDL ENDORSEMENT <input type="checkbox"/> CDL CHANGE STATE-OF-RECORD (out-of-state transfer) <input type="checkbox"/> CDL RENEWAL <input type="checkbox"/> CDL DUPLICATE <input type="checkbox"/> CDL UPDATE/UPGRADE	CLASS COMMERCIAL LICENSE OR PERMIT APPLYING FOR: <input type="checkbox"/> A (Combination Vehicles - GVWR 26,001 pound or more) <input type="checkbox"/> B (Single Vehicles, GVWR 26,001 pounds or more) <input type="checkbox"/> C (Single Vehicles, GVWR less than 26,001 pounds) ENDORSEMENTS: <input type="checkbox"/> H - HazMat <input type="checkbox"/> S - School Bus* <input type="checkbox"/> T - Double/Triple Trailers <input type="checkbox"/> P - Passenger* (16 or more persons, including driver) <input type="checkbox"/> N - Tank Vehicles	REAL ID CREDENTIAL OPT-IN/OPT OUT BOX (Please select desired credential type) <input type="checkbox"/> REAL ID CREDENTIAL <input type="checkbox"/> NON REAL ID CREDENTIAL Please be advised that Non REAL ID Credentials will have "Not for Federal ID Purposes" on the card. ALL CDL CLASSES REQUIRE A SKILLS TEST Skills test are administered by the Community College of Rhode Island. To book an appointment call 401-825-1146.
<i>* Road test is required in addition to the written knowledge test to obtain the endorsement</i>		

Applicant's Information (Complete All Fields)

LAST NAME:		FIRST NAME:		MIDDLE NAME:	
DATE OF BIRTH: (MM/DD/YY)	GENDER: <input type="checkbox"/> MALE <input type="checkbox"/> FEMALE	SOCIAL SECURITY NUMBER:	PASSPORT/EMPLOYMENT AUTHORIZATION/RESIDENT ALIEN CARD NUMBER:		
RI DRIVER'S LICENSE NUMBER:		CURRENT CLASS LICENSE: <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> 10			
STREET ADDRESS: RESIDENCE ADDRESS		APT/UNIT # or FLOOR #:	CITY/TOWN:	STATE:	ZIP CODE:
STREET ADDRESS: MAILING ADDRESS (IF DIFFERENT FROM RESIDENCE)		APT/UNIT # or FLOOR #:	CITY/TOWN:	STATE:	ZIP CODE:
TELEPHONE: ()	ACTIVE MILITARY: <input type="checkbox"/> YES <input type="checkbox"/> NO	100% DISABLED VETERAN: <input type="checkbox"/> YES <input type="checkbox"/> NO	VETERAN DESIGNATION: <input type="checkbox"/> YES (DD 214 MUST BE SHOWN, STATING "HONORABLE DISCHARGE") <input type="checkbox"/> NO		

Place Of Birth (Complete All Fields)

COUNTRY:	STATE/PROVINCE:	CITY:
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Physical Information (Complete All Fields)

HEIGHT: ft/in	WEIGHT: lbs	EYE COLOR: (check one) <input type="checkbox"/> BROWN <input type="checkbox"/> GREEN <input type="checkbox"/> GRAY <input type="checkbox"/> DICHROMATIC <input type="checkbox"/> BLUE <input type="checkbox"/> BLACK <input type="checkbox"/> HAZEL <input type="checkbox"/> PINK	HAIR COLOR: (check one) <input type="checkbox"/> BLACK <input type="checkbox"/> BROWN <input type="checkbox"/> WHITE <input type="checkbox"/> BALD <input type="checkbox"/> BLONDE <input type="checkbox"/> RED <input type="checkbox"/> GRAY
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Medical Certification

Medical Qualifications: Unless specifically exempted, you must possess a valid medical examiner's certificate in order to operate a commercial motor vehicle (49CFR 391.41). Government employees (e.g., federal, state, county or city employees) while operating government owned vehicles are exempt from this medical requirement.

Self-Certification

You must determine what type of commerce you operate in. You must certify to the Division of Motor Vehicles (DMV) one (1) of the four (4) types of commerce you operate in as listed below (select one):

1. Interstate Non-Exempted: You are an Interstate non-exempted driver and must meet the Federal DOT medical card requirements (e.g., - you are "not exempted").

2. Interstate Exempted: You are an Interstate exempted driver and do not have to meet the Federal DOT medical card requirements.

3. Intrastate Non-Exempted: You are an Intrastate non-exempted driver and are required to meet the medical requirements for your State.

4. Intrastate Exempted: You are an Intrastate exempted driver and do not have to meet the medical requirements for your State.

If you are subject to the DOT medical card requirements, please provide a new DOT medical to your DMV (located in Cranston) prior to the expiration of the current DOT medical card.

General Questions (Complete All Fields)

1. Are you a Rhode Island resident?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	7. Do you use any type of corrective lenses while driving?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
2. Do you want to register (or continue to be registered) as an Organ and Tissue Donor? <small>(If you are currently registered as an organ and tissue donor, you will remain registered only if you chose YES every time.) Visit donatelifenewengland.org for more information.</small>	<input type="checkbox"/> YES	<input type="checkbox"/> NO	8. Are you disqualified from operating a commercial vehicle by Federal DOT regulations?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
			9. Are you a U.S. Citizen?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
3. Is your license or right to operate a vehicle currently suspended, revoked, or refused by this or any other state?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	10. We will use your information to update your voter registration or register you to vote. Party: _____ <input type="checkbox"/> Do not use my information for voter registration. (The place where you register, or your decision not to register, is confidential.) If you are under age 16, you will not be registered to vote. If you are at least age 16, you will be pre-registered to vote. (You must be at least age 18 to vote.)		
4. Do you have any conditions (other than eyesight) that could impair your ability to drive a motor vehicle? If yes, list any: _____	<input type="checkbox"/> YES	<input type="checkbox"/> NO			
5. Have you ever been convicted of a motor vehicle offense in any court? If yes, please explain: _____	<input type="checkbox"/> YES	<input type="checkbox"/> NO			
6. Have you ever held a license in any other state? If yes, what is the most recent state? _____ License Number: _____ Exp. Date: _____ Endorsements: _____ Restrictions: _____	<input type="checkbox"/> YES	<input type="checkbox"/> NO	NOTICE TO MALES 18 TO 26 YEARS OF AGE: Pursuant to RI Gen. Laws 31-10-47(a), "(a)ny male, United States citizen or immigrant who is at least eighteen (18) years of age, but less than twenty-six (26) years of age shall be registered in compliance with the requirements of section 3 of the "Military Selective Service Act", 50 U.S.C. App. 451 et seq., when applying to receive a driver's license, renewal or identification card or renewal." Pursuant to RI Gen. Laws 31-10-47(b), the applicant recognizes that by submitting this application he is consenting to registration with the Selective Service system, if so required by federal law.		

CDL History

As part of my application, I swear or affirm that I have held a license to operate any time of motor vehicle within the last ten (10) years in the following states, for the following periods of time, under the following names:

STATE	LICENSE NUMBER	DATES LICENSE WAS HELD	NAME AT THAT TIME

I certify that I meet qualification requirements in Section 391 of the Federal Motor Carrier Safety Regulations.
 I certify that the vehicle I operate or expect to operate is representative of the class of license applied for.
 It is a misdemeanor to knowingly make any false statement to a public official and is punishable by fines up to \$1,000.00 or up to one year in jail, RIGL §11-18-1. Also, any false statements on your application could result in the revocation of your license, RIGL §31-11-1.

I, the undersigned, hereby make application for either a commercial driver's license, permit, renewal, endorsement, or change state-of-record, and declare under penalty of perjury that all statements made on this application are true and complete to the best of my knowledge and belief.

Personal information contained in your motor vehicle records will be disclosed only if the state has obtained the express consent of the person to whom such personal information pertains

DO YOU CONSENT TO SUCH DISCLOSURE? YES NO

_____ Signature of Applicant _____ Applicant's Printed Name _____ Date

DO NOT COMPLETE – FOR DMV USE ONLY

CLERK #: _____ RES: _____ END: _____ 10-YR HISTORY APPROVAL DATE: _____
 With corrective lenses? PASS FAIL License issuance under Skills Test Exemption YES NO
 Without corrective lenses? PASS FAIL Opted not to renew HazMat YES NO

NOTE: ALL REAL ID LICENSE AND ID TRANSACTIONS REQUIRE A COMPLETED LI-1 FORM AND THE CORRECT NUMBER OF REQUIRED DOCUMENTS LISTED IN THE 3 BOXES BELOW

Proof of Identity Documents List

You must present one (1). These must bear the applicant's legal name and date of birth.

- A valid, unexpired **U.S. passport**;
- A **certified copy of a birth certificate** filed with a State Office of Vital Statistics or equivalent agency in the individual's State of birth;
- A **Consular Report of Birth Abroad (CRBA)** issued by the U.S. Department of State, Form FS-240, DS-1350 or FS-545;
- A valid, unexpired **Permanent Resident Card** (Form I-551) issued by DHS or INS;
- An unexpired **Employment Authorization Document (EAD)** issued by DHS, Form I-766 or Form I-688B;
- An **unexpired foreign passport** with a valid, unexpired U.S. visa affixed accompanied by the approved I-94 form documenting the applicant's most recent admittance into the U.S.;
- A **Certificate of Naturalization** issued by DHS, Form N-550 or Form N-570; or
- A **Certificate of Citizenship**, Form N-560 or Form N-561, issued by DHS.

Proof of a change to the name contained on the applicant's primary identity document must be demonstrated with a document issued by an authorized government agency.

If you have obtained or renewed your passport within the last 6 months, please bring an additional Identity Document, as your passport may not verify with the national database.

Proof of Residency Documents List

You must present two (2). P.O. Box addresses will not be accepted.

- A **utility bill** (gas, electric, telephone, cable, oil, water, sewer, satellite, heat, cell phone) with the address of residence clearly stated in the applicant's name or in the name of a member of the applicant's immediate family dated within the past sixty (60) days;
 - A **personal check or bank statement** with the applicant's name and address of residence dated within the past sixty (60) days;
 - A **payroll check** with the applicant's name and address of residence dated within the past sixty (60) days;
 - A **lease agreement** currently in effect. The lease agreement must contain the applicant's name and address of residence and the landlord's name, address, and telephone number.
Handwritten lease agreements will not be accepted;
 - A **letter issued by a Rhode Island state agency or a federal agency** with the applicant's name and address of residence approving the applicant's receipt of benefits from an entitlement program dated within the past sixty (60) days;
 - A **homeowner's or renter's insurance policy** for the applicant's home or apartment with the applicant's name and address of residence that is currently in effect;
 - An **automobile insurance policy** for the applicant's motor vehicle with the applicant's name and address of residence that is currently in effect;
 - A **property tax bill** for the applicant's residence from the immediately preceding year;
 - A **letter from a Rhode Island shelter or halfway house** indicating that the applicant resides at the facility. Such a letter must be on letterhead, must be dated within the past thirty (30) days and must include the name and contact information of an administrator of the shelter or halfway house;
 - A **jury duty summons** dated within the past sixty (60) days;
 - A **W-2 form** with the applicant's name and address of residence from the immediately preceding year;
 - An **installment loan contract** (automobile, student loan) with the applicant's name and address of residence that is currently in effect;
 - A current **Social Security Administration statement** with the applicant's name and address of residence;
 - A current **pension or retirement account statement** with the applicant's name and address of residence;
 - A Rhode Island-issued **firearms permit** with the applicant's name and address of residence that is currently in effect; or
 - A **valid Rhode Island driver's license or identification card**;
- If the applicant is a minor, in addition to any of the proof of residency documents listed above, the following are accepted:
- A **school record** from the current school year (report card, diploma, transcript, or ID card) stating the student's address of residence (past year if during summer vacation)
 - The Rhode Island driver's license or identification card of the individual signing the minor's application.

Proof of a Social Security Number Documents List

You must present one (1).

- An official **Social Security Card** (laminated cards are acceptable);
- A **letter issued by the Social Security Administration** stating that the applicant is not eligible to receive a Social Security Number;
- A **W-2 form** bearing the applicant's **full name and full Social Security Number**. The form must have been issued within the last five (5) years;
- A **1099 form** bearing the applicant's **full name and full Social Security Number** issued within the last five (5) years; or
- A **paystub** bearing the applicant's **full name and full Social Security Number** issued within the last five (5) years.

Note: All U.S. Territories driver's license transfers and RI State ID cards are only done at the DMV Cranston Headquarters. These transactions are not performed at any DMV or AAA branch office.

NOTE: EACH OF THE TRANSACTION DESCRIPTIONS BELOW REQUIRE ADDITIONAL DOCUMENTS ALONG WITH THE SUPPORTING DOCUMENTS FROM ABOVE

New Permit

- Driver Education Certificate (if under 18) ¹ - If you have a driving certificate, that has not been approved by CCRI, you must take the knowledge exam test.

¹ If under 18 years of age and applying for a learner's permit, the LI-1 form must be notarized if parent/guardian has a different last name than applicant.

American Sign Language (ASL) computerized permit exams or selected foreign language permit exams (please refer to DMV website for details) require a pre-scheduled appointment.

Name Change

- Social Security Card* (not a copy) or notice with your updated name (must wait 24 hours for name change to register with the Social Security Administration)
- Current RI license or Identification card
- Original government issued document indicating name change (ex. Marriage Certificate or Divorce Decree)

Address Change

- Current RI license or Identification card

RI License/ID/Permit Renewal or Duplicate AND New ID

DMV Customer only needs completed LI-1 form and the required supporting documents from above.

All non U.S. citizens *must* bring all supporting documents to be reviewed.

Gender Change

- Gender Designation form
- Current RI license or Identification card

Out-of-State Transfer

- Your current license from the other state
- If the out-of-state license is not available at time of transfer you must submit a driving record or verification from the other state with an Identity Document (see list).**

Motorcycle Permit

- Certificate of completion from the RI Motorcycle Safety course
- Current RI license (must hold permit for 30 days)

Motorcycle License

- Current license and valid motorcycle permit

New Permit

- LI-1 form
- A certified birth certificate (not a copy) or Proof of Identity Document (see list)
- Driver Education Certificate (if under 18) ¹
 - If you have a driving certificate, that has not been approved by CCRI, you must take the knowledge exam test.
- Proof of Social Security Number
- Two (2) Proof of residency (see list)

¹ If under 18 years of age and applying for a learner's permit, the LI-1 form must be notarized if parent/guardian has a different last name than applicant.

American Sign Language (ASL) computerized permit exams or selected foreign language permit exams (please refer to DMV website for details) require a pre-scheduled appointment.

Name Change

- LI-1 form
- Social Security Card* (not a copy) or notice with your updated name (must wait 24 hours for name change to register with the Social Security Administration)
- Current RI license or Identification card
- Original government issued document indicating name change (ex. Marriage Certificate or Divorce Decree)

New ID

- LI-1 form
- A certified birth certificate (not a copy) or Proof of Identity Document (see list)
- Proof of Social Security Number
- Two (2) Proof of residency (see list)

RI License/ID/Permit Renewal or Duplicate

- LI-1 form
 - One identity document (see list)
- All non U.S. citizens must bring all supporting documents to be reviewed.**

Address Change

- LI-1 form
- Current RI license or Identification card

Gender Change

- LI-1 form
- Gender Designation form
- Current RI license or Identification card

Out-of-State Transfer

- LI-1 form
 - Your current license from the other state
 - Two (2) Proof of residency (see list)
 - Proof of Social Security Number
- If the out-of-state license is not available at time of transfer you must submit a driving record or verification from the other state with an Identity Document (see list).**

Motorcycle Permit

- LI-1 form
- Certificate of completion from the RI Motorcycle Safety course
- Current RI license (must hold permit for 30 days)

Motorcycle License

- LI-1 form
- Current license and valid motorcycle permit

Proof of Identity Documents List
You must present one (1). These must bear the applicant's legal name and date of birth.

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- A **certified copy of a birth certificate** filed with a State Office of Vital Statistics or equivalent agency in the individual's State of birth;
- A **Consular Report of Birth Abroad (CRBA)** issued by the U.S. Department of State, Form FS-240, DS-1350 or FS-545;
- A valid, unexpired **Permanent Resident Card** (Form I-551) issued by DHS or INS;
- An unexpired **Employment Authorization Document (EAD)** issued by DHS, Form I-766 or Form I-688B;
- An **unexpired foreign passport** with a valid, unexpired U.S. visa affixed accompanied by the approved I-94 form documenting the applicant's most recent admittance into the U.S.;
- A **Certificate of Naturalization** issued by DHS, Form N-550 or Form N-570;
- A **Certificate of Citizenship**, Form N-560 or Form N-561, issued by DHS;
- A U.S. Active Service, Retiree, or Reservist **Military ID Card**;
- A **Native American Tribal ID Card**;
- A valid **U.S. Driver's License** with photograph, signature, and date of birth (must not be expired for more than one year);
- A valid **U.S. Territory Driver's License** with photograph, signature, and date of birth (must not be expired for more than one year);
- A valid **Canadian Driver's License** with photograph, signature, and date of birth (must not be expired for more than one year); or
- An **employment authorization document (EAD)** issued by DHS, Form I-766, that indicates a grant of deferred action under the Deferred Action for Childhood Arrivals (DACA) Program.

Proof of Residency Documents List
You must present two (2). P.O. Box addresses will not be accepted.

- A **utility bill** (gas, electric, telephone, cable, oil, water, sewer, satellite, heat, cell phone) with the address of residence clearly stated in the applicant's name or in the name of a member of the applicant's immediate family dated within the past sixty (60) days;
 - A **personal check or bank statement** with the applicant's name and address of residence dated within the past sixty (60) days;
 - A **payroll check** with the applicant's name and address of residence dated within the past sixty (60) days;
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 - A **homeowner's or renter's insurance policy** for the applicant's home or apartment with the applicant's name and address of residence that is currently in effect;
 - An **automobile insurance policy** for the applicant's motor vehicle with the applicant's name and address of residence that is currently in effect;
 - A **property tax bill** for the applicant's residence from the immediately preceding year;
 - A **letter from a Rhode Island shelter or halfway house** indicating that the applicant resides at the facility. Such a letter must be on letterhead, must be dated within the past thirty (30) days and must include the name and contact information of an administrator of the shelter or halfway house;
 - A **jury duty summons** dated within the past sixty (60) days;
 - A **W-2 form** with the applicant's name and address of residence from the immediately preceding year;
 - An **installment loan contract** (automobile, student loan) with the applicant's name and address of residence that is currently in effect;
 - A current **Social Security Administration statement** with the applicant's name and address of residence;
 - A current **pension or retirement account statement** with the applicant's name and address of residence;
 - A Rhode Island-issued **firearms permit** with the applicant's name and address of residence that is currently in effect; or
 - A **valid Rhode Island driver's license or identification card**;
- If the applicant is a minor**, in addition to any of the proof of residency documents listed above, the following are accepted:
- A **school record** from the current school year (report card, diploma, transcript, or ID card) stating the student's address of residence (past year if during summer vacation)
 - The Rhode Island driver's license or identification card of the individual signing the minor's application.

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- A **1099 form** bearing the applicant's **full name and full Social Security Number** issued within the last five (5) years; or
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