Tax Assessor

Tax Exemption for Trucks, Trailers, & Buses

Affidavit Regarding Truck, Trailer or Bus Operated Exclusively in Interstate Commerce

Please fill out Sections 1 & 2 if applicable.

Section 1: TO BE COMPLETED BY REGISTRANT

_____________________________________________________________________
Name of Registrant

_____________________________________________________________________
Address of Registrant State Zip Code

I hereby certify that from ________ to __________ in 2018, truck, trailer, or bus described below was operated by a bus or trucking company solely to transport property or passengers for hire and that no transportation of any property or passenger both originated and terminated within the State of Rhode Island. If an operator of such truck, trailer, or bus during such calendar year was a bus or trucking company that not the registrant, I hereby certify that an Affidavit of Truck, Trailer of Bus operated exclusively in Interstate commerce is signed under penalty of perjury by each such bus or trucking company that was an operator of such truck, trailer, or bus during such calendar year and each such signed affidavit is set forth in Section 2 hereof or is attached hereto.

DESCRIPTION OF VEHICLE: _________ Truck _____________ Trailer ____________ Bus

ICC Permit number, if any: _________________________
U.S DOT number, if any: ___________________________ 
Rhode Island registration number: ____________________
Year: ____________ Make:_____________ Model: __________
V.I.N: ____________________________________________
If I am a cooperate officer, partner, executor, receiver, administrator, or trustee of the named registrant and I am signing this affidavit on behalf of the named registrant, I certify that I have the authority to execute this affidavit on behalf of the named registrant.

Signed under penalty of perjury, this ____________ day of ___________________ 2019

________________________________________
Print Name First Last

________________________________________
Signature Title

________________________________________
Telephone Number(s)

Section 2: TO BE COMPLETED BY BUS OR TRUCKING COMPANY THAT WAS THE OPERATOR BUT NOT THE REGISTRANT

________________________________________
Name of Bus or Trucking Company

________________________________________
Address State Zip Code

I hereby certify that from _______________ to _______________ in 2018, the bus or trucking company named above operated the truck, trailer, or bus described below solely to transport property or passengers for hire and that no transportation of any property or passenger both originated and terminated within the State of Rhode Island.

DESCRIPTION OF VEHICLE: ___________ Truck _____________ Trailer ___________ Bus

  ICC Permit number, if any: _________________________
  U.S DOT number, if any: ___________________________
  Rhode Island registration number: __________________
  Year: ___________ Make: ___________ Model: ___________
  V.I.N: __________________________________________
If I am a cooperate officer, partner, executor, receiver, administrator, or trustee of the named registrant and I am signing this affidavit on behalf of the named registrant, I certify that I have the authority to execute this affidavit on behalf of the named registrant.

Signed under penalty of perjury, this _____________ day of ___________________ 2019

____________________________
Print Name

____________________________
Signature

____________________________
Telephone Number(s)