STATE OF RHODE ISLAND
DIVISION OF PUBLIC UTILITIES AND CARRIERS
MOTOR CARRIER DIVISION
89 JEFFERSON BLVD. - WARWICK, RHODE ISLAND 02888

TELEPHONE: (401)941-4500       FAX: (401) 941-9161

COMPLAINT FORM

COMPLAINT FILED BY: ________________________________

ADDRESS: ___________________________________________

HOME PHONE: _______________    BUSINESS PHONE: _______________

COMPLAINT FILED AGAINST: ________________________________

ADDRESS: ___________________________________________

Vehicle registration: __________ Date of occurrence: ________ Time: ______

Please explain the basis for the complaint in detail. Also furnish any other information which may be helpful to the investigation. Copies of all receipts, bills of lading or contracts you have should be forwarded with the complaint.

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

SIGNED: _________________________ DATE: ____________