



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

**Department of Business Regulation
INSURANCE DIVISION
1511 Pontiac Avenue, Bldg. 69-2
Cranston, RI 02920
Telephone No. (401) 462-9520
www.dbr.state.ri.us**

FAX No. (401) 462-9602

REQUEST FOR LETTER OF CERTIFICATION

THIS FORM IS TO BE USED FOR ADJUSTERS AND TITLE LICENSEES ONLY

(Please Print)

NAME: Last _____ First _____ MI
ADDRESS: _____
CITY: _____
STATE: _____
ZIP: _____

RHODE ISLAND LICENSE NO: _____
Individual SS # _____

NUMBER OF LETTERS REQUESTED: _____ \$15.00 for each letter requested

Checks should be made payable to “**General Treasurer, State of Rhode Island**”

****You must include a self addressed stamped envelope.***

Revised 1/15/08