



STATE OF MAINE – BUREAU OF MOTOR VEHICLES

Statement of Fact

ACTIVE DUTY SERVICE MEMBERS EXCISE TAX EXEMPTION

Name: _____ DOB: _____

Unit: _____ Phone: _____

Station/Base: _____

Home of Record (legal address claimed for tax purposes):

Commander's Certification:

- ☐ This individual is on active duty and is permanently assigned to the unit and station identified above.
Eligibility expiration date: _____
- ☐ This individual is (or was) deployed for military service in a combat zone for a period of at least 180 consecutive days. Dates of deployment: _____ to _____.

(Commander or Commander's Agent Printed Name)

(Commander or Commander's Agent Signature)

(Date)

BMV USE	Plate #:	Class Code:	Date:	Initials:
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This statement must be completed at the time of registration and re-registration.