MAINE BUREAU OF MOTOR VEHICLES
APPLICATION FOR SEAT BELT EXEMPTION

BMV Use Only

Placard #: _____
Issue Date: _____
Exp Date: _____
Returned #: _____
Replaced #: _____
Issued By: _____
Entered: _____

☐ New Application ☐ Re-Application ☐ Replacement

Applicant's Name: _____

Address: _____

_____

Phone #: _____ DOB: _____

Applicant's Statement of Understanding:
This removable windshield placard is designed to hang from the rearview mirror when the vehicle is in motion without obstructing the view of the operator. If the vehicle is not equipped with a rearview mirror, the placard must be displayed on the dashboard. A placard issued to a person expires when the medical provider's certificate expires, which may not exceed 6 years.

Applicant's Signature: _____ Date: _____

Medical Provider's Statement:

This seatbelt exemption should expire on _____ (may not exceed 6 years).

This patient has a medical condition that warrants an exemption from the requirements of having to wear a seatbelt while riding in or operating a motor vehicle.

The patient's specific condition is:

_____

_____

Wearing a seatbelt is a risk for this patient because:

_____

_____

Medical Provider: ☐ Physician ☐ Physician's Assistant ☐ Nurse Practitioner ☐ Registered Nurse

Printed Name: _____ Signature: _____ Date: _____

Address: _____ Medical License #: _____

_____ Phone #: _____

Completed forms may be mailed/faxed to:

Bureau of Motor Vehicles
Disability Clerk
29 State House Station
Augusta, ME 04333
Fax: (207) 624-9204

101 Hospital Street, 29 State House Station, Augusta, ME 04333-0029
Phone: (207) 624-9000 Ext. 52149 TTY user call Maine relay 711