

STATE OF HAWAII  
DEPARTMENT OF TRANSPORTATION  
HIGHWAYS DIVISION  
Motor Vehicle Safety Office  
601 Kamokila Blvd., Room 511  
KAPOLELE, HAWAII 96707  
Telephone: (808) 692-7661 FAX: (808)692-7665

**EXEMPT VEHICLE**

I, \_\_\_\_\_, am the owner and operator of a \_\_\_\_\_, \_\_\_\_\_,  
(Registered owner) (Year) (Make)

\_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_,  
(Model) (License Number) (Serial Number/VIN)

tare weight of \_\_\_\_\_ pounds and a manufacturer's gross vehicle weight rating of \_\_\_\_\_ pounds.

Description of vehicle/equipment: \_\_\_\_\_.

This vehicle is for my personal or farm use only and it will not be used in the furtherance of any Commercial, Industrial or Educational enterprise(s).\*

I certify the above information to be true and correct.

\_\_\_\_\_  
(Print Name and Title)

\_\_\_\_\_  
(Signature) (Phone Number)

\_\_\_\_\_  
(Street Address/City/State/Zip Code)

\_\_\_\_\_  
(Mailing Address/City/State/Zip Code)

**TO WHOM IT MAY CONCERN:**

The aforementioned vehicle is **EXEMPT** from all Motor Carrier Safety Vehicle Inspections. This vehicle should be inspected under the county operated vehicle inspection program. A valid safety inspection sticker affixed to the rear bumper of the vehicle will be sufficient.

\_\_\_\_\_  
(Motor Carrier Safety Officer Signature/ Badge No.) Date: \_\_\_\_\_ Time: \_\_\_\_\_

\*Note: Vehicles listed in Hawaii Revised Statutes, Sections 286-207 and 286-208 are exempt from the Motor Carrier Safety Rules and Regulations.

**This vehicle exemption does not exempt individual from driver license requirements.  
A copy of this form must be kept in the vehicle at all times.**