

6 F. Business Owner Information

Complete this section for vehicles owned by a business entity or leasing company. Proof of FID is required if the business entity is not on record. Proof of FID includes 147C, CP575, or Form 2180, all issued by the Internal Revenue Service (IRS).

F1 – Enter business email address (optional).

F4 and F5 USDOT# and TIN - Required for motor carriers operating commercial motor vehicles that are:

- Engaged in intrastate commerce (business conducted solely in Massachusetts) having a Gross Vehicle or Gross Combo Weight rating of over 10,000 pounds; or

- Used in the transportation of hazardous materials in quantity requiring placarding; or
- Designed to transport more than 15 passengers, including the driver, used in intrastate commerce in Massachusetts

To obtain a USDOT# visit www.fmcsa.dot.gov

F6 – DBA (Doing Business As) – This field is for Section 5 applicants only. Enter the DBA name.

F7 – SSN if Sole Proprietor – When registering vehicles as sole proprietor, proof of FID and the sole proprietor's Social Security (SSN) Card are required.

F8 Physical Address – Enter the physical location of the business.

F9 Mailing Address – Enter the business mailing address.

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7 G. Garaging Address

G1- The garage address is where the vehicle is physically located or garaged overnight. This address is used to identify which city or town will issue the excise tax bill to the customer.

8 H. Lienholder Information

If the vehicle is financed, enter the financial institution's name and address. If the lienholder code is unknown, leave blank.

9 I. Sales or Use Tax Schedule

I1 - When the vehicle is purchased from a licensed motor vehicle dealer, the dealer must complete this section.

I2 - When the vehicle is purchased directly from an auction the sale price including buyer's premium must be entered. The Dealer must also complete the Sale by Licensed Motor Dealer and Authorized Dealer Signature in Section I1

I3 - When the vehicle is purchased from someone other than a licensed motor vehicle dealer this section must be completed.

I4 - When the vehicle is tax exempt this section is completed by the RMV.

10 J. Purchase Information

J1- The date of purchase for the vehicle being registered/titled must be entered in this section.

J2-J5 This section must be completed when a person is converting their vehicle from out of state to MA.

11 K. Insurance Information

K1, K2, K3 and K5 - This section is to be completed, signed and stamped by a Massachusetts authorized insurance agent or company. Proof of insurance is required on all transactions with the exception of Salvage Title and Title Only. Proof of insurance MAY be required on renewals, plate reinstatements, and some amendments. The insurance stamp is valid for 30 days.

K4- Self-Insured

This section must be completed for all self-insured vehicles. There are 3 instances where self-insured is acceptable. 1) Customer posts a bond with the US Treasurer's Office 2) the entity is a State or Municipal office or 3) the entity is a utility company. The Treasurer's Office will issue a Treasurer's Certificate, which must be submitted at the time of the transaction to register the motor vehicle.

12 L. Seller Information

L1 and L2 - This section must be completed with the Seller Name and Seller Address.

13 M. Certification and Signature of Applicants

All owners are required to sign and date this application.



NEW Registration and Title Application Instruction Guide

This guide was developed to assist customers and business partners with the transition from the current RMV-1 and RMV-3 forms to the new Registration and Title Application (RTA). The RTA combines and replaces the RMV-1 and RMV-3 forms and should be used for the following transactions:

- Register and title a vehicle
- Transfer plate to a new vehicle
- Reinstate a registration
- Apply for a salvage title
- Apply for a title only
- Apply for a registration only
- Transfer a plate between two vehicles
- Register previously titled vehicle
- Title previously registered vehicle
- Transfer vehicle to surviving spouse
- Change plate on existing vehicle with no amendments
- Renew a registration
- Amend a registration

ONLY RMV-1 + RMV-3 Form accepted

November 12

BOTH RMV-1 + RMV-3 Form & New Registration and Title Application accepted

December 16

Only New Registration and Title Application accepted

Transition Timeline

Tuesday, November 12th – Friday, December 13th – Acceptance of Current RMV-1 and RMV-3 form

The RMV-1, RMV-3 and new Registration and Title Application (RTA) will be accepted, regardless of the Policy Effective Date or Policy Change Date listed.

Monday, December 16, 2019 – New Registration and Title Application Required

Beginning on Monday, December 16, 2019 the new Registration and Title Application (RTA) will be required. The RMV-1 and RMV-3 forms will no longer be accepted as of this date.

New Information Required

Trim – The trim level is a version of the vehicle model, which defines the different features and options (e.g. SL – Standard Level, LE – Luxury Edition) that will be collected to determine accurate vehicle value.

Owner ID Requirements – A customer must select and provide proof of the identification document being used for registration purposes. See Section 4 of the instructions for additional detail.

USDOT Number and TIN – Effective September 1, 2018 motor carriers with vehicles that fall into the categories listed in Section 6 of these instructions were required to obtain a USDOT number under 540 CMR 2.22 (2). The RMV will now begin collecting the USDOT number (e.g. 123456) and associated Tax Identification Number (TIN). The TIN is either the motor carrier's federal identification number or SSN.

Garaging Address – A full garaging address (e.g. street, city, state, zip) will be collected rather than just the city/town to improve excise billing practices. This is the address where the vehicle is physically located or garaged overnight.

Purchase Information – The answers to the series of questions in this section of the application will be used to determine the sales tax amount due and whether it is required in situations where the vehicle registration/title is being converted to MA from another state.

Visit mass.gov/RMV for a fillable version of this form and for additional information about the documentation required to process Registration and Title transactions.

| | | | |
|---|--------------------------------------|--|----------------|
| 6 F. Business Owner Information | | F1. Email <input type="checkbox"/> Cell <input type="checkbox"/> Home <input type="checkbox"/> Work Phone# | |
| F2. EIN/FID | F3. Corp/Co/Organization/Lessor Name | | F4. USDOT# |
| F6. DBA Dealer - Farmer - OC - Repair - and Transporter use only | | F7. SSN if Sole Proprietor | |
| F8. Physical Address | Apt. # | City | State Zip Code |
| F9. Mailing Address <input type="checkbox"/> Same as Physical Address | Apt. # | City | State Zip Code |

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|--|--------|------|-------|----------|
| 7 G. Garaging Address Address where vehicle is principally garaged. | | | | |
| G1. Address | Apt. # | City | State | Zip Code |

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|---|------|---------|
| 8 H. Lienholder Information The bank, financial institution, or private party that financed your vehicle loan. | | |
| 1st Lien Code | Name | Address |
| 2nd Lien Code | Name | Address |
| 3rd Lien Code | Name | Address |

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|---|---|--|--|
| 9 I. Sales or Use Tax Schedule | | Numbers I1 or I2 must be completed by a licensed dealer. Number I3 must be completed for all casual/private sales. Number I4 is completed for sales tax exemptions by the RMV. | |
| I1. Sale by Licensed Motor Dealer Dealer EIN/FID #: | I2. Sale By Auction Sale Price including Buyer's Premium: | | |
| Authorized Dealer's Signature: | | | |
| MSRP: | Total Sales Price: | | |
| Less Manufacturers Excise: | | | |
| Trade-In 1 VIN: | Less Trade-In Allowance: | | |
| Year: | Make: | Model: | |
| Trade-In 2 VIN: | Less Trade-In Allowance: | | |
| Year: | Make: | Model: | |
| Taxable Sales Price: | MA Sales Tax Paid: | I4. Claim Exemption Code Form Attached (If Required) | |

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|---|--|---|--|
| 10 J. Purchase Information | | J1. Purchase Date: | J2. Is this vehicle being converted from another state with the same owner? # Yes, answer questions J3-J5 below <input type="checkbox"/> Yes <input type="checkbox"/> No |
| J3. MA Resident at Time of Purchase? <input type="checkbox"/> Yes <input type="checkbox"/> No | J4. Was Mass Sales Tax Previously Paid? <input type="checkbox"/> Yes <input type="checkbox"/> No | J5. Proof of Tax or Letter of Delivery provided? <input type="checkbox"/> Yes <input type="checkbox"/> No | |

| | | |
|---|------------------------|---------------------------------|
| 11 K. Insurance Information | | |
| The company signatory hereby certifies that it has or will insure or guarantee performance by the applicant herein before named with respect to the motor vehicle herein before described for a period at least coterminous with that of such registration under a motor vehicle liability policy, binder or bond which conforms to the provisions of general laws, Chapter 175, Section 113A, and that the premium charge and classification on the effective date of registration are as established by the commissioner of insurance under Chapter 175, Section 113B, 113H and Chapter 175E. | | |
| K1. Insurance Company | K2. Insurance Code | K3. Effective Date of Insurance |
| K4. Self Insured? <input type="checkbox"/> Yes <input type="checkbox"/> No | K5. Policy Change Date | |
| Insurance Company's Authorized Representative's Signature | | |

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|---------------------------------|--------|------|-------|----------|
| 12 L. Seller Information | | | | |
| L1. Seller Name (Please Print) | | | | |
| L2. Address | Apt. # | City | State | Zip Code |

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| 13 M. Certification and Signature of Applicant(s) | | Application not complete without all required signatures. | | |
| I/We the applicants hereby certify under the penalties of perjury that there are no outstanding excise tax liabilities on the vehicle described above that have been incurred by the applicant(s), any member of the applicant's immediate family who is a member of the applicant's household or the business partner of the applicant(s). The RMV reserves the right to verify any representations or documents you provide. Whoever knowingly makes any false statement in application for registration of a motor vehicle is subject to prosecution and a fine and/or imprisonment upon conviction (M.G.L. c.90, §24). The Registrar may also revoke any registration obtained by false statements or misrepresentations. I hereby affirm under the penalty of perjury that the representations and/or documents I have provided in this Section are true and accurate, I further understand that falsely affirming to any matter required by the Registrar under Chapter 90 may be considered to be the commission of perjury under Chapter 90, Section 28 and punished as such under M.G.L. c. 268, §1. | | | | |
| Signature: Owner/Lessee 1 | | Date: | | |
| Signature: Owner/Lessee 2 | | Date: | | |

1

| A. Service Type | |
|--|--|
| Select the transaction to be performed. Provide the plate number below if applicable. | |
| Plate Type | Plate Number |
| Transactions/Amendments in bold require an insurance stamp. <i>Italicized</i> transactions may require an insurance stamp. Transactions with * require plate type and number above. | |
| I Want To: <input type="checkbox"/> Register and title a vehicle <input type="checkbox"/> Transfer plate to a new vehicle* <input type="checkbox"/> Reinstatement a registration* <input type="checkbox"/> Apply for a salvage title <input type="checkbox"/> Apply for a title only <input type="checkbox"/> Apply for a registration only <input type="checkbox"/> Transfer a plate between two vehicles* <input type="checkbox"/> Register previously titled vehicle <input type="checkbox"/> Title previously registered vehicle* <input type="checkbox"/> Transfer vehicle to surviving spouse* | <input type="checkbox"/> Change plate on existing vehicle with no amendments* <input type="checkbox"/> Renew a registration* <input type="checkbox"/> Amend a registration* Select the information to be amended. Enter new information in the section indicated. <input type="checkbox"/> Registration Type (B 3.) <input type="checkbox"/> Address (D, E or F) <input type="checkbox"/> Color (B 4.) <input type="checkbox"/> Lessee (E) <input type="checkbox"/> Fuel Type (B 8.) <input type="checkbox"/> Garaging Address (G) <input type="checkbox"/> Total Gross Weight (B 12.) <input type="checkbox"/> Insurance (K) <input type="checkbox"/> Name (D or F) <input type="checkbox"/> Other: <input type="checkbox"/> VIN (B 1.) For vehicles with no MA Title |

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| B. Vehicle Information | |
|--|---|
| B1. Vehicle Identification Number (VIN) | B2. Body Style |
| B3. Registration Type: <input type="checkbox"/> Passenger <input type="checkbox"/> Commercial <input type="checkbox"/> Bus <input type="checkbox"/> Livery <input type="checkbox"/> Camper <input type="checkbox"/> Trailer <input type="checkbox"/> Taxi <input type="checkbox"/> Motorcycle <input type="checkbox"/> Semi-Trailer <input type="checkbox"/> Other: | B4. Color(s): <input type="checkbox"/> Black <input type="checkbox"/> White <input type="checkbox"/> Brown <input type="checkbox"/> Blue <input type="checkbox"/> Yellow <input type="checkbox"/> Gray <input type="checkbox"/> Purple <input type="checkbox"/> Green <input type="checkbox"/> Orange <input type="checkbox"/> Red <input type="checkbox"/> Silver <input type="checkbox"/> Gold |
| B5. Year Make Model Model# Trim | B6. Transmission Type: <input type="checkbox"/> Automatic <input type="checkbox"/> Manual <input type="checkbox"/> Other: <input type="checkbox"/> Diesel <input type="checkbox"/> Hybrid <input type="checkbox"/> Other: |
| B7. Number of: Cylinders / Passengers / Doors | B8. Fuel Type: <input type="checkbox"/> Gas <input type="checkbox"/> Electric <input type="checkbox"/> Propane <input type="checkbox"/> Diesel <input type="checkbox"/> Hybrid <input type="checkbox"/> Other: |
| B9. Odometer (Miles) | B10. Bus: <input type="checkbox"/> Regular <input type="checkbox"/> DPU <input type="checkbox"/> School Bus <input type="checkbox"/> School Pupil <input type="checkbox"/> School Pupil/Taxi <input type="checkbox"/> School Pupil/Livery |
| B11. If carrying passengers for hire, enter max seating capacity | B12. Total Gross Weight (Laden) Cannot exceed GVWR |

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| C. Title Information | |
|--|---|
| C1. Vehicle Condition <input type="checkbox"/> New <input type="checkbox"/> Used | C2. Previous Title Issue Date (MM/DD/YYYY) |
| C3. Previous Title Number Previous Title State Previous Title Country | C4. Title Type: <input type="checkbox"/> Clear <input type="checkbox"/> Salvage <input type="checkbox"/> Reconstructed <input type="checkbox"/> Theft <input type="checkbox"/> Prior Owner Retained <input type="checkbox"/> Owner Retained |
| C5. Primary Salvage Title Brand: <input type="checkbox"/> Repairable <input type="checkbox"/> Parts Only | C6. Secondary Salvage Brand(s): <input type="checkbox"/> Vandalism <input type="checkbox"/> Flood <input type="checkbox"/> Theft <input type="checkbox"/> Fire <input type="checkbox"/> Salt <input type="checkbox"/> Collision <input type="checkbox"/> Other |

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| D. Owner 1 Information | |
|--|---|
| D1. Select Owner(s) Identification Requirement being provided for registration purposes <input type="checkbox"/> MA License/ID <input type="checkbox"/> Out-of-State License <input type="checkbox"/> Out-of-Country License <input type="checkbox"/> Social Security Number <input type="checkbox"/> Lawful Presence | |
| D2. 1st Owner's Name (Last, First, Middle) | D3. Date of Birth (MM/DD/YYYY) |
| D4. License# / ID# / SSN | D5. Residential Address Apt. # City State Zip Code |
| D6. State/Country of License/ID | D7. Mailing Address <input type="checkbox"/> Same as Residential Apt. # City State Zip Code |
| D8. Exp. Date of License/ ID/ Lawful Presence | D9. Email <input type="checkbox"/> Cell <input type="checkbox"/> Home <input type="checkbox"/> Work Phone# |
| Owner 2 Information | |
| D10. Select Owner(s) Identification Requirement being provided for registration purposes <input type="checkbox"/> MA License/ID <input type="checkbox"/> Out-of-State License <input type="checkbox"/> Out-of-Country License <input type="checkbox"/> Social Security Number <input type="checkbox"/> Lawful Presence | |
| D11. 2nd Owner's Name (Last, First, Middle) | D12. Date of Birth (MM/DD/YYYY) |
| D13. License# / ID# / SSN | D14. Residential Address Apt. # City State Zip Code |
| D15. State/Country of License/ID | D16. Mailing Address <input type="checkbox"/> Same as Residential Apt. # City State Zip Code |
| D17. Exp. Date of License/ ID/ Lawful Presence | D18. Email <input type="checkbox"/> Cell <input type="checkbox"/> Home <input type="checkbox"/> Work Phone# |

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| E. Lessee Information / In Custody of | | |
|---------------------------------------|--|------------------------|
| E1. 1st License #/ ID #/ SSN/ FID | E2. 1st Lessee or Corp/Co/Organizations Name | E3. 1st Lessee Address |
| E4. 2nd License #/ ID #/ SSN/ FID | E5. 2nd Lessee or Corp/Co/Organizations Name | E6. 2nd Lessee Address |

Follow through instructions to all sections chronologically to complete the application.



1 A. Service Type Select the service you want to process and identify any information you wish to amend. The transactions are listed in the I Want To area of this section. If you select a transaction with an asterisk (*) next to it you must enter the existing plate type and number in the Plate Type and Plate Number fields.

I Want To:

- Register and title a vehicle** - Select this to apply for new plates and title a newly obtained vehicle. **Complete Sections A-M.**
- Transfer plate to a new vehicle** - Select this to transfer an existing plate to a newly obtained vehicle with the same owner(s). Plate Type and Plate Number must be entered in Section A. **Complete Sections A-M.**
- Reinstatement a registration** - Select this to pay an outstanding reinstatement fee. This transaction may require an Insurance Stamp. **Complete Sections A, B, D or F, E if leased, G, K and M.**

1 A. Service Type cont.

- Apply for a salvage title**- Select this to apply for a Salvage Title. **Complete Sections A-J, L and M.**
- Apply for a title only** - Select this to apply for a title with no registration issued. Sales tax may be required. **Complete Sections A-J, L and M.**
- Apply for a registration only**- Select this to apply for a new plate when no title is required (e.g. trailers less than 3000 lbs or for a Dual Registration). **Complete Sections A-B, D-G and I-M.**
NOTE: Dual Registration is when motor vehicles or trailers registered in another state need to be registered in MA under the dual registration concept (MGL Chapter 90, Section 3) and display plates from both jurisdictions (as required in MGL Chapter 90, Section 6). This applies to vehicles that meet all of the following conditions:
 - Owned by nonresidents
 - Registered in another state
 - In the possession of, or under the control of, MA residents for more than 30 days (not necessarily consecutive) within a calendar year period
- Transfer a plate between two vehicles** - Select this to transfer an existing active plate to another vehicle that is currently titled to the same owner. **Complete Sections A-B, D-G and I-M.**
- Register a previously titled vehicle** - Select this to add a plate to a vehicle that is currently titled to the same owner. **Complete Sections A-B, D-G and I-M.**
- Title a previously registered vehicle** - Select this to apply for a new title on a vehicle that has been previously registered without a title. This transaction may be common on smaller trailers where the gross weight is increasing. **Complete Sections A-J and L and M.**
- Transfer vehicle to a surviving spouse** - Select this when vehicle ownership is transferred to a surviving spouse. The Surviving Spouse transaction is available for passenger vehicles only. If using existing plate, please provide Plate Type and Plate Number in Section A. The Affidavit of Surviving Spouse form and a death certificate must be submitted with this transaction. **Complete Sections A-M.**
- Change plate on existing vehicle with no amendments** - Select this to change the existing plate to a new plate with no amendments. Please provide Plate Type and Plate Number in Section A. If changing to a commercial plate or School Pupil plate, the Total Gross Weight must be recorded in B12. If changing to a Livery or Bus plate, complete B10 and B11. **Complete Sections A, B, D or F, E if leased, G, K and M.**
- Renew a registration** - Select this to renew a registration. Insurance Stamp may be required if the insurance policy record has not been submitted by the insurance carrier. The following fields can be changed during the renewal: weight, seats, passengers, garage address, color, residential address, mailing address and insurance company. **Complete Sections A, B, D or F, E if leased, G, K and M.**
- Amend a registration** - Select this to amend information on your Certificate of Registration, including changing your plate. Select the information you are changing and enter the new information in the appropriate section as indicated. **Complete Sections A, B, D or F, E if leased, G, K and M.**

2 B. Vehicle Information

Sections B1 - B8 - Required for all transactions.

B4 - Color(s) - Up to two colors may be selected for a multi-color vehicle. If selecting two colors, indicate colors by marking the color box with a 1 for primary and a 2 for the secondary color.

B5 - Trim - The trim level is a version of the vehicle model, which defines the different features and options. (e.g. SL - Standard Level, LE - Luxury Edition)

B7 - Passengers - For all "For Hire" vehicles or 7D the number of passengers is the total number of seats including the driver and must match the seat capacity in B11.

B8- Fuel Type - "Other" options include Compressed Natural Gas, Convertible, Electric and Diesel, Electric and Gas, Ethanol, Flexible, Hydrogen Fuel Cell and Methanol

2 B. Vehicle Information cont.

B9 Odometer - Enter odometer in miles only. All other units must be converted to miles.

B10 - If registering a Bus, choose the correct type/use. If choosing DPU, you must submit a valid DPU Certificate.

B11 - Enter the maximum seating capacity including the driver, for all "For Hire" vehicles or 7D. The fees are based on the total number of seats and will be used to calculate the registration fees.

B12 - Total Gross Weight - Enter the total gross (full) weight of commercial vehicles or trailers. The total gross weight cannot exceed the Gross Vehicle Weight Rating (GVWR) set by the manufacturer.

3 C. Title Information

Fields C1 - C4 - Required for all vehicles that require a title.

C5 - Primary Salvage Title Brand - Only required for a Salvage Title

C6 - Secondary Salvage brand- Only required for a Salvage Title

4 D. Owner Information (1 and 2)

Complete this section for all transactions that have individual owners. Up to two people can be listed as owners.

D1 - Select the Owner Identification Requirement being provided for registration purposes. By law (M.G.L. c.90 § 2) a 'natural person' applying for a vehicle registration must provide at least one (1) of the following:

- Unexpired Massachusetts Driver's License or Massachusetts ID Card Number - Number will be verified by the RMV.
- Unexpired Out-of-State (OOS) or Out-of-Country (OOC) Driver's License - Physical license required if in-person. If owner is not physically present, a color copy of the front and back of the license is required.
- Your Social Security (SSN) Card - Physical SSN Card must be presented. The card cannot be laminated.
- Proof of lawful presence - Must present one of the documents listed on mass.gov/ID

D4, D6, & D8 - Enter the number, state/country and expiration of the identification document that is selected in D1.
NOTE: The RMV reserves the right to attempt to verify any representations or documents the customer has provided in this Section. Whoever knowingly makes any false statement in an application for registration of a motor vehicle is subject to prosecution and a fine and/or imprisonment upon conviction (M.G.L. c.90, §24). The Registrar may also revoke any registration obtained by false statements or misrepresentations.

D9 & D18 - Enter owner's email address (optional)

D5 & D14 Residential Address - The residential address is where the owner resides. The residential address must be a MA address. If there are two owners, the residential address that displays on the registration will be Owner 1.

D7 & D16 Owner Mailing Address - Enter the mailing address if it is different from the residential address. If there are two owners, the mailing address that displays on the registration will be Owner 1. Registration related documents (I.E., the registration, suspension/revocation notices, excise tax bills etc.) will be mailed to the residential address unless a different address is entered in the owner 1 mailing address fields.

5 E. Lessee Information/In Custody of

E1 - Complete this section if the vehicle is leased or if the vehicle is owned by a non-resident, but in custody of a Massachusetts resident. List the Lessee License, ID, or SSN. If Lessee is a business, list the business FID. Complete the section by listing the lessee name and address.

E4 - If there are two lessees, complete the 2nd lessee information. The lessee information must match Purchase and Sales Agreement. Up to two lessees can be listed.

OVER