



**Massachusetts Registry of Motor Vehicles**  
**RMV-1 Application Form 617-351-4500**  
 www.mass.gov/rmv

1. REG. EFF. DATE

2. REG. EXP. DATE

3. Number of Documents \_\_\_\_\_

4.  ST (Salvage Title)

TO (Title Only)

RO (Registration Only)

RT (Registration & Title)

SW (Summer/Winter Swap)

RX (Registration Transfer)

TAR (Title Add Registration)

SS (Surviving Spouse)

**Registration/Vehicle Information**

5. Plate Type \_\_\_\_\_ 6. Registration Number \_\_\_\_\_ 7. Previous Title # \_\_\_\_\_ 8. State \_\_\_\_\_

9. Type of Registration:  Passenger  Bus  Taxi  Livery  Commercial  
 Trailer  Auto Home  Semi-Trailer  Motorcycle  Other \_\_\_\_\_

10. Vehicle Identification Number: \_\_\_\_\_

11. Year \_\_\_\_\_ 12. Make \_\_\_\_\_ 13. Model Name \_\_\_\_\_ 14. Model # \_\_\_\_\_ 15. Body Style \_\_\_\_\_

16. Circle Color(s) of Vehicle 0-Orange 1-Black 2-Blue 17. # of Cylinders/Passengers/Doors/Wheels  
 3-Brown 4-Red 5-Yellow 6-Green 7-White 8-Gray 9-Purple / / /

18. Transmission  Automatic  Manual  
 19. Total Gross Weight (Laden) \_\_\_\_\_

20. Motor Power  Gasoline  Diesel  Propane  Conversion  Electric  Hybrid  Other \_\_\_\_\_  
 21. Bus:  Regular  DTE  Livery  Taxi  School Pupil  
 If carrying passengers for hire, max no of passengers that can be seated: \_\_\_\_\_  
 If school bus, is it used exclusively for city, town, or school district?  Yes  No

**Owner Information**

22. Owner #1 MA License. Use SSN if out-of-state \_\_\_\_\_ 23. Owner #2 MA License. Use SSN if out-of-state \_\_\_\_\_ 24. EIN/FID# (see block 29) \_\_\_\_\_

25. Owner #1 Name (Last, First, Middle) \_\_\_\_\_ 26. Owner #1 Date of Birth \_\_\_\_\_

27. Owner #2 Name (Last, First, Middle) \_\_\_\_\_ 28. Owner #2 Date of Birth \_\_\_\_\_

29. Corp/Co/Organization Name (see block 24) \_\_\_\_\_ 30. City/Town Where Vehicle is Principally Garaged: \_\_\_\_\_

31. Mailing Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

32. Residential Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

33A. Lessee's MA License Number or EIN/FID Number. If out-of-state Lessee, use SSN and date of birth. \_\_\_\_\_ 33B. Lessee's Name \_\_\_\_\_

\_\_\_\_\_ D D M M Y Y

34. Lessee's Address, City, State, and Zip Code \_\_\_\_\_

**Title Data** 35. Date of Purchase \_\_\_\_\_ 36. Odometer Reading \_\_\_\_\_

37.  New Vehicle  Used Vehicle 38. Title Type:  Clear  Salvage  Reconstructed  Owner Retained  Theft  Prior Owner Retained

39. Primary Salvage Title Brands:  Repairable  Parts Only 40. Secondary Salvage Brand(s): \_\_\_\_\_

**Lienholder Information** I/we certify that all liens on this vehicle are listed below. 41. Date of 1st Lien \_\_\_\_\_ 42. Date of 2nd Lien \_\_\_\_\_

43. First Lienholder Code \_\_\_\_\_ 44. Name \_\_\_\_\_

45. Lienholder's Address \_\_\_\_\_

46. Second Lienholder Code \_\_\_\_\_ 47. Name \_\_\_\_\_

48. Lienholder's Address \_\_\_\_\_

**Insurance Certification** The company signatory hereto hereby certifies that it has or will insure or guarantee performance by the applicant hereinbefore named with respect to the motor vehicle hereinbefore 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.

49A. Policy Effective Date: \_\_\_\_\_ Policy Change Date: \_\_\_\_\_

49B. Manual Class: \_\_\_\_\_ 49C. Ins. Company & Code \_\_\_\_\_ Insurance Co's Authorized Representative's Signature \_\_\_\_\_

**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 applicants household or the business partner of the applicant(s). I/We hereby further certify that all information contained in this application is true and correct to the best of my knowledge and belief. I/We understand that false statements are punishable by fine, imprisonment, or both.

50. Signature of Owner From Block 25 or 29. If owner is listed in Block 29, signer must also print name. \_\_\_\_\_

51. Signature of 2nd Owner From Block 27 \_\_\_\_\_

52. Authorized Dealer's Signature \_\_\_\_\_ 53. Dealer Reg. No. \_\_\_\_\_

54. Seller's Name (Please Print) \_\_\_\_\_ 55. Seller's Address \_\_\_\_\_

**Sales or Use Tax Schedule**

**56A. SALE BY LICENSED MOTOR VEHICLE DEALER**

MA DOR-Registered Dealer EIN/FID # \_\_\_\_\_

Total Sale Price (adjusted for dealer's discount and manufacturers rebate) \$ \_\_\_\_\_

Less Manufacturer's Excise \$ \_\_\_\_\_

Net Sales Price \$ \_\_\_\_\_

Less Trade-in Allowance For: \$ \_\_\_\_\_

Yr \_\_\_\_\_ Make \_\_\_\_\_ Model \_\_\_\_\_

Trade-in VIN \_\_\_\_\_

Taxable Sales Price \$ \_\_\_\_\_

6.25% Sales Tax \$ \_\_\_\_\_

**B. SALES BY OTHER THAN MOTOR VEHICLE DEALER**

Gross Sales Price (Proof Required) \$ \_\_\_\_\_

6.25% Sales/Use Tax \$ \_\_\_\_\_

**C. CLAIM EXEMPTION FROM TAX CODE:** \_\_\_\_\_

Form attached (if required) \_\_\_\_\_

Exempt Organization Certificate # \_\_\_\_\_

**Fee Information**

57. Reg: \$ \_\_\_\_\_ Payment: \_\_\_\_\_

Title: \$ \_\_\_\_\_  Cash

Tax: \$ \_\_\_\_\_  Check

P&I: \$ \_\_\_\_\_  EFT/CC

Total: \$ \_\_\_\_\_ Clerk ID: \_\_\_\_\_

58. Batch No: \_\_\_\_\_

59. Clerk/End User Initials: \_\_\_\_\_



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49A. Policy Effective Date: \_\_\_\_\_

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49B. Manual Class: | 49C. Ins. Company & Code

Insurance Co's Authorized Representative's Signature

**CERTIFICATE OF REGISTRATION**

**This document is the Certificate of Registration for the herein described vehicle. Section 11, Chap. 90, MGL states ..."Every person operating a motor vehicle shall have the Certificate of Registration for the vehicle and for the trailer, if any, and his license to operate, upon his person or in the vehicle in some easily accessible place."**

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