

Out-of-State Verification Inspection Form



Massachusetts Registry of Motor Vehicles
Vehicle Safety and Compliance Services
P.O. Box 55892
Boston, MA 02205-5892

This form is used to verify that your vehicle or equipment is out of state, and will miss its required Massachusetts motor vehicle inspection. Please type or print all requested information. Please note that if you check the first selection in the box below, you must provide proof of your passing inspection (a copy of your passing inspection receipt). Forms not accompanied by satisfactory proof will not be accepted. Please keep a copy of this completed form with your vehicle registration until which time you return the vehicle to Massachusetts and have it inspected.

Registration Number _____

Vehicle Identification Number (VIN) _____

Registration Expiration Date _____

Current Odometer Reading _____
(if applicable)

Owner's Name _____

Vehicle/Equipment Year _____

Address _____

Vehicle/Equipment Make _____

City, State, Zip _____

Vehicle/Equipment Model _____

Out-of-State Mailing Address _____

Expected Return to Massachusetts Date _____

City, State, Zip _____

Out of State Telephone Number _____

Please check one (1)

- I hereby certify that the above vehicle or equipment has passed the inspection required by the jurisdiction in which the vehicle is currently domiciled. As proof, I have attached a copy of my passing inspection receipt. (Note: For trailers and tow dollies, check this box and attach a copy of an FMVSA / "DOT" Inspection Form.)
- I hereby certify that the jurisdiction in which the above vehicle or equipment is currently domiciled lacks an inspection program or does not inspect vehicles registered in other jurisdictions.

I hereby certify that I am temporarily residing in another jurisdiction because I am . . .

- A student In military service A seasonal resident Other

Within fifteen (15) days of being returned to the Commonwealth of Massachusetts, the vehicle or equipment identified on this form must have a vehicle inspection performed by a Massachusetts vehicle inspection station, as required by law. This requirement holds even if the vehicle bears an inspection sticker that is still valid in another state. If you have any questions, please contact the Registry of Motor Vehicles, Vehicle Safety and Compliance Services at (617) 351-9345. I swear, under the penalties of perjury, that to the best of my knowledge the statements I have made herein are accurate, and I agree to abide by the laws and regulations set forth by the Commonwealth of Massachusetts.

Vehicle Owner/Representative's Signature _____ Date _____