



*The Commonwealth of Massachusetts*  
*Executive Office of Transportation*  
*Registry of Motor Vehicles*  
*www.mass.gov/rmv*

RACHEL KAPRIELIAN  
*Registrar*

Mail:  
Section 5 Division  
P.O. Box 55897  
Boston, MA 02205-5897  
(617) 351-9272

Dear Transporter Applicant:

A "Transporter" is defined as any person engaged principally and substantially in the business of transporting or delivering motor vehicles under their own power not owned by him/her, who possesses a valid license for said business issued by the Department of Telecommunications and Energy (DTE), or any person or agent thereof, licensed to engage in the business of financing the purchase of or insuring motor vehicles who is required to take into possession such motor vehicles by foreclosure or subrogation of title.

It will be necessary for you to furnish copies of the following documents in order to obtain Transporter plates:

1. **A Business certificate from the city or town in which you are doing business.**
2. **Corporation papers from the Secretary of State, Department of Corporations and Taxation (if applicable).**
3. **DPU Certificate of Compliance (if towing for the Police Department).**
4. **Federal Identification Number/Employer Identification Number (FID/EIN)\* from the Department of the Treasury, Internal Revenue Service. If you currently have an FID/EIN, please enclose a copy of one of the following most common forms of proof of an FID/EIN:**
  - Any pre-printed IRS correspondence that includes corporation name, address, and FID/EIN number
  - Federal Tax Deposit Coupon **Form 8109**
  - **Form 147C**
  - Notice of New Employer Identification Number Assigned **Form 5372**
  - **CP575** Notice (issued by the IRS). This is a letter sent to a customer to confirm issuance of an FID number.
  - Certificate of Exemption **Form ST-2** (issued by DOR)

**Note:** If your business is unincorporated (e.g. a sole proprietor or general partnership), then the pre-printed IRS correspondence must list the owner information in this sequence: the individual's name, business name, and address.

Please complete the enclosed application and return it to this office. A return envelope is provided for your convenience. Your request will be referred for investigation and you will be notified of the result.

\* If you do not have an FID/EIN, you can obtain one from the Internal Revenue Service at 1-800-829-4933.

**Note: The business name or corporation name must be spelled exactly the same on all of the above documents.**





**SECTION 3:**

1. As an owner, do you currently have or have you ever had a Section 5 General Registration plate? . . . . YES NO  
(e.g., Dealer, Repairer, Owner Contractor, Transporter, or Farmer.)

1a. If yes, complete the following information.

Plate: Type \_\_\_\_\_ Number \_\_\_\_\_ Status:  Active  Expired  Canceled

1b. If yes, has the plate been suspended or revoked? . . . . . YES NO

2. If the business is a corporation please list officers:

\_\_\_\_\_ President

\_\_\_\_\_ Treasurer

\_\_\_\_\_ Clerk

3. Please describe the type of business you perform:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

The undersigned hereby certify that all information contained in this application is true and correct to the best of my (our) knowledge and belief. (False statements are punishable by fine, imprisonment, or both.)

Signature: \_\_\_\_\_  
*Title*

Date: \_\_\_\_\_

Signature: \_\_\_\_\_  
*Title*

Date: \_\_\_\_\_

*(If a corporation, include the title of the officer or duly authorized agent. If a partnership, both partners must sign.)*



Section 5 Division  
PO Box 55897  
Boston, MA 02205

## Transporter Application Checklist

The following is a list of documents and/or activities that must be completed prior to the State police Inspection. Please submit the completed list with your application for Transporter Plates. Once your application is approved, you will receive a letter of notice with a list of general requirements that need to be met prior to the State Police Inspection.

You must be principally and substantially engaged in the business of transporting or delivering motor vehicles not owned by you, and possess a valid license for business issued by the Department of Telecommunications and Energy (DTE), or licensed to engage in the business of financing the purchase of or insuring motor vehicles who is required to take into possession such motor vehicles by foreclosure or subrogation of titles. Please submit a copy of your current Business Certificate.

Ensure that you have a permanently affixed exterior sign posted of sufficient size and design to give the general public notice of the name and nature of the business. What are the signs dimensions?

Height: \_\_\_\_\_ Length: \_\_\_\_\_ Width: \_\_\_\_\_ What does the sign say?

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Section Five registrants cannot share office space. You must have a separate and exclusive entrance to your place of business, unless they are both owned by you. Please submit a floor plan with your application.

The building structure, or office trailer must have adequate office space to conduct business. Please include this information on your floor plan.