



EVR Plate Cancellation Error Correction

Registry of Motor Vehicles · EVR Program
P.O. Box 55889 · Boston, MA 02205-5889

Instructions

This form should ONLY be submitted by Dealers or Insurance Agents on the EVR Program within 30 days of the date of the error.

Please provide all the following information and email this form to MassDOTRMVEVRCASESupport@dot.state.ma.us

Reminder: To see if this error has been corrected, process a plate inquiry. If the error has not been corrected after two hours, please email this form again and note that you are making a second request for assistance.

Agency/Dealership Information

Agency/Dealership Name		Contact Name		
Contact Email		Contact Phone Number	Contact FAX Number	
Date of Error	Plate Type <input type="checkbox"/> PAN <input type="checkbox"/> PAR <input type="checkbox"/> PAS <input type="checkbox"/> PAV <input type="checkbox"/> CON <input type="checkbox"/> COV <input type="checkbox"/> TRN <input type="checkbox"/> Other _____			
Registration #		Customer Name		
How did the error occur?				