



RMV Business Partner Contact Form

- New Business Account
- Reactivate Account
- Revised Business Account Contact Info
- Adding a new program to an existing account

RMV Program _____ (Provide a contact form for each program your will be enrolled) Date: _____

Business Name

Legal Business Name _____

DBA	Federal Employer ID Number (FEIN)
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Mailing Address

Street	City	State	Zip Code
Email			Phone #

Reason for Access: _____

Business Contact Information

Business Contact (The person the RMV will contact regarding issues with the program)

Email	Phone #
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Legal Contact (if applicable)

Email	Phone #
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Financial Contact (if applicable)

Email	Phone #
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Technical Contact (if applicable)

Email	Phone #
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Security Contact Information

Security Contact #1

Email	Phone #
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Security Contact #2 (if applicable)

Email	Phone #
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Processing Entity (Only complete this section if you are using a third party processor to access RMV data)

Processing Entity Name	Contact Name
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Mailing Address

Street	City	State	Zip Code
Email			Phone #

Note: You are not required to have multiple contacts, the same person could fill multiple roles.
Return form to: RmvBusinessPartners@dot.state.ma.us



eServices Administrator Access Form

RMV Business Partners must designate a Security Administrator(s). The Security Administrator(s) will be able to log into the eServices Portal to:

- create and terminate security credentials
- add/delete security roles for both your business in-house end users and permissible external end users, if applicable*.

This form must be completed to receive eService Administrator credentials. The RMV recommends that each business have at least two (2) Administrators, but may approve additional ones if the business has more than fifty (50) end users. Please note that eService Administrators cannot create additional Administrator credentials; these credentials can only be issued by the RMV.

*Insurance Companies only: Insurance Agencies will be responsible for creating/terminating security credentials for all of their end users. If an insurance agency needs access to update policies for your insurance company, your eService Administrator will be able to add the update role to the insurance agencies end user's credentials provide by the insurance agency.

Type of Request (Check One)

New Administrator Update Administrator Information

Business Name

Legal Business Name	D.B.A.
Federal Employer ID Number (FEIN)	RMV Program(s)
Mailing Address	

Business or Security Contact Certification and Signature

I, _____, hereby designate the below named individual as an eServices Administrator for this business.

Business or Security Contact Signature: _____ Date: _____

Designated eServices Administrator Information

Name	Title
Email	Phone #
Last 4 Digits of Social Security Number	Driver License #: If non Mass resident must attach a photo copy of state issued license or ID.

Type of Access (check one): Admin Only Admin & Inquiry Admin, Inquiry & Update

eServices Administrator Certification and Signature

I have read the Agreement for Access to Records and Data Maintained by the Registry of Motor Vehicles. I understand that, as part of my application to become an eServices Administrator, the RMV will conduct a background check on me, and access will be denied if I have been convicted of a felony involving violence, dishonesty, deceit or indecency. As the eService Administrator for the above listed business, I agree that I will abide by all the terms of the Agreement for Access to Records and Data Maintained by the Registry of Motor Vehicles, and will only grant security credentials to permitted users, assign roles to authorized End Users and will deactivate an End User's security credentials immediately upon termination.

eServices Administrator's Signature: _____ Date: _____

All approved eServices Administrators are required to watch the RMV's Computer Based Training (CBT) for Administrative Access course. Further information on this course will be provided to the eServices Administrator when access is granted and credentials are issued.

Return form to: RmvBusinessPartners@dot.state.ma.us or mail to:
MassDOT RMV-IS Security • 25 Newport Avenue Ext. • Quincy, MA 02171