



Massachusetts ELT Program Service Provider Change Form

Registry of Motor Vehicles - ELT Program
P.O. Box 55885 Boston, MA 02205-5589 Email: AtlasELT@dot.state.ma.us

Instructions

This form is to be completed by a Lender (Lienholder) that is currently participating in the MA ELT Program and is changing their Service Provider. Please complete all sections of this form and email to: AtlasELT@dot.state.ma.us

Current Service Provider Information

Service Provider	Contact Email Address
Contact Person Name	Contact Phone Number

New Service Provider Information

Service Provider	Contact Phone Number
Contact Person Name	Contact Email
Requested Date of Change	

Lienholder Information

Legal Name of Lienholder	Name/Title of the Contract Signer
MA Lienholder Code	Contact Person Name
Contact Person Phone Number	Contact Email

Sample - For Review Only