MASSACHUSETTS REGISTRY OF MOTOR VEHICLES

Tax Collector’s Notice of Excise Tax Delinquency by General Registration Holder
(For official use of Municipal Tax Assessors/Collectors only)

City/Town of ________________________________

1. The following identified business is located in the municipality identified herein

_______________________________________      ________________________________________
Name of business           Street Address

2. The business has motor vehicles registered with a General Registration and General Registration
Number Plate(s) ___________ issued pursuant to MGL Chapter 90, Section 5. The plate-type is:
Registration No.
(circle one)    Dealer        Repairer       Farmer       Owner-Contractor

3. Written demand has been made by the Tax Collector’s Office and/or its agents pursuant to MGL
Chapter 60A for payment of overdue motor vehicle excise tax. Payment of the tax, interest, and
costs has not been tendered as of today’s date. The amount now due is:

$______________   $___________    $_____________    $_________________
Excise Tax Due                Interest Due                Authorized Costs                        Total Due*

(*Total amount does not include the $20.00 charge due the Registrar by MGL Chapter 60A, Section 2A.)

4. As a duly authorized Tax Collector of this municipality, I respectfully request the Registrar take
appropriate action pursuant to the provisions of MGL Chapter 60A, Section 2A, including not
renewing the General Registration and General Registration Number plates issued to this business,
until the Registrar has been notified by this office that full payment has been received.

5. I certify that this Notice of Excise Tax Delinquency is in accord with the provisions of MGL
Chapter 60A, Section 2A and that no pending action is before the local Board of Assessors or the
Appellate Tax Board for any abatement of the excise tax described herein nor has a decision been
rendered by either body in regard to this matter within the past thirty (30) days. The Tax Collector
will promptly notify the Registrar when full payment has been received.

Dated this _________day of ____________________, 20___

______________________________  ________________________________
Signature       Printed Name

______________________________  ________________________________
Position         Area Code and Telephone Number

______________________________  ________________________________
No. and Street Address                 City/Town & Zip Code

Mail to:
Supervisor, Section Five Division
Registry of Motor Vehicles
P.O. Box 55897
Boston, MA 02205-5897

Note:
This completed form must be mailed with a letter on the official stationery of the municipality or of
the Tax Collector and must refer to: “Notice of Excise Tax Delinquency.”