



Junking or Scrapping a Motor Vehicle

Registry of Motor Vehicles • Title Division
P.O. Box 55885 • Boston, MA • 02205-5885

A. Requirements and Instructions

Per M.G.L. Chapter 90D, Section 20(e), complete this form and mail it, along with the Certificate of Title, to the address above.

B. Information of Person Junking the Vehicle

Last Name		First Name	Middle Initial	Suffix
Business Name (if applicable)				
Address				
Street	City	State	Zip Code	
Email Address			Phone #	

C. Vehicle Information

Model Year	Make	Model
VIN #	Title # (Registration # if exempt)	State

D. Vehicle Purchased or Received From

Last Name		First Name	Middle Initial	Suffix
Business Name (if applicable)				
Address				
Street	City	State	Zip Code	
Date of Purchase or Receipt (MM, DD, YYYY)				

E. Certification and Signature

The undersigned certifies under the pains and penalties of perjury, that the above described motor vehicle was junked or scrapped on _____ Date

Authorized Signature (company junking the vehicle): _____

Printed Name: _____