



TOWN OF TEWKSBURY BOARD OF ASSESSORS

TOWN HALL ANNEX, 11 TOWN HALL AVENUE

TEL: 978-640-4330 FAX: 978-851-4849

E-MAIL: assessorapplications@tewksbury-ma.gov

HOURS: MONDAY – FRIDAY, 7:30 A.M. TO 4:30 P.M.

APPLICATION FOR MOTOR VEHICLE EXCISE ABATEMENT

Filing of this application does not stay collection of this tax. Incomplete applications will be returned.

When applying for an adjustment it is the applicant's responsibility to contact us for a new amount.

A new bill will not be issued. Refunds will be issued for over payments.

Taxpayer Information:

Name(s) (as shown on bill)		Phone #		
Address (as shown on bill)				
No.	Street	City/Town	State	Zip Code
Mailing address (if different)				
No.	Street	City/Town	State	Zip Code

Bill Information:

Bill #	Plate #	Vehicle Yr
Bill Yr	VIN #	Make/Model

Reason for Application: Check reason you are applying **and** provide the specified documentation

- DV Plate (Disabled Veteran) DV plate registration **or** letter from RMV that states eligible for DV Plate
- Vehicle sold or traded Bill of Sale **and** plate cancellation receipt from Registry of Motor Vehicles (RMV) or new registration if plate transferred to another vehicle
- Vehicle stolen or total loss Insurance settlement letter **and** plate cancellation receipt, C-19 Form (Affidavit of lost or stolen plate from RMV) or new registration
- Vehicle repossessed Notice from lienholder **and** plate cancellation receipt, C-19 Form or new registration
- Vehicle Junked Receipt from junkyard **and** plate cancellation receipt, C-19 Form or new registration
- Vehicle returned
(ex: Lemon Law) Letter from dealer certifying return **and** plate cancellation receipt or new registration form
- Moved from billing city/town
Date of move: ____ / ____ / ____ Proof of residency before January 1 of tax year bill (e.g., utility *before January 1st of tax year bill*, voter registration, lease) **and** proof RMV notified before January 1 of address change.
NOTE: You are not entitled to abatement if you moved to another Massachusetts city or town during the same calendar year of the excise tax. You must notify the RMV within 30 days of moving and before January 1 to be billed by your new city or town next year.
- Moved from Massachusetts
Date of move: ____ / ____ / ____ Registration from new state or country **and** plate cancellation receipt

If vehicle ownership was transferred (sold, traded, stolen, totaled, junked, donated, etc.) please provide:

Date transferred _____ Name of New Owner _____

If plates were transferred to another vehicle please provide:

Date registered _____ Make and Year of New Vehicle _____

X _____ **X** _____
 Subscribed to under penalties of perjury by (Sign if printed, type name if submitting electronically) Date
 Check this box if submitting electronically and provide email address as acknowledgement of your electronic signature.
 E-mail Address: _____

Office use only

Assessed excise	\$ _____	Date:	_____
Abatement	\$ _____	Abatement #	_____
Adjusted excise	\$ _____ (plus any fees/charges)		