MASSACHUSETTS VEHICLE CHECK Cleaner Air • Safer Roads

Massachusetts Vehicle Check Inspector Training Application 787-A Hartford Turnpike, Shrewsbury, MA 01545

Please complete **ALL** sections of this form in **INK** and mail to Massachusetts Vehicle Check at the address above, or email to InspectorTraining@MAVehicleCheck.com Incomplete applications cannot be processed.



NOTE: This application is for Inspector Training. You will also need to apply for the license on MyRMV

| SECTION A | Applicant Information | PLEASE PRI | INT CLEARLY |
|---|---------------------------------------|---------------------|---|
| | First | Middle | <u> </u> |
| 1. Applicant Name | | | Ta a const |
| 2. 'S' Number (MA | . Driver's License or MA. State Issue | ed ID): | 3. Date of Birth: / / / M M / D D / Y Y |
| 4. Mailing Address | : | | |
| 5. City: | | 7. State: | 6. Zip Code: |
| 8. Cell Phone: | | 9. Alternate Phone: | 4 |
| 10. EMail Address: | | | |
| 11. Email Address2 | 2: | | |
| 12. Station ID: | - — — — — — — | _ 13. Station Name: | |
| Non-commercial (\$157.50) Commercial (\$122.00) 7D (\$105.00) Motorcycle (\$84.00) Commercial Recertification* (\$114.00) SECTION D Training Location: Select preferred Training MAC location. | | | |
| 15. Training Location Preference(s): Bourne Shrewsbury | | | |
| Once Opus receives your application, you will be scheduled into the next available class. Classes become available by demand Tewksbury West Springfield Next Available (must be willing to travel to any training location) | | | |
| Please bring a check or money order to class with you, payable to: Opus Technologies | | | |
| Please make every effort to attend your assigned training. Please call the program's Call Center should you need to reschedule. Customer Service Center - 1.844.358.0135 | | | |
| Please provide at least 48-hour notice that you cannot attend your training. You will be required to pay a missed class fee should you not attend your assigned training. | | | |
| I certify under penalty of perjury under the laws of the Commonwealth of Massachusetts that the statements made in this application are true and correct. I agree to abide by the Rules & Regulations set forth by the Commonwealth of Massachusetts. I understand that any reports of violations of the Emission Inspection Law, or of the Rules and Regulations will be investigated and, if found to be true, could result in my decertification as an Inspector or other penalties. | | | |
| | Applicant Signature | | Date |