MASSACHUSETTS



Massachusetts Vehicle Check Registered Emissions Repair Facility 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 RERF@MAVehicleCheck.com

Incomplete applications will be returned.





SECTION A Facility Information	PLEASE PRINT CLEARLY			
1. Repair Facility Name:				
2. Existing Registered Emissions Repair Facility (RERF) ID: RP				
3. Repair Facility Contact Name (Owner or Manager):				
4. Repair Facility Address:				
5. City:	6. Zip Code:			
7. State:	8. Telephone Phone: ()			
9. Alternate Number: ()	9. Fax: ()			
11. E-Mail Address:@				
12: Repair Facility Website:				
13. Association Memberships:				

SECTION B Registered Emissions Repair Technicians Employed

14. Please list each Registered Emissions Rep	air Technician (RERT) working at your	r facility and complete a RERT application for each.
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14a	14e
14b	14f
14c	14g
14d	14h

SECTION C RERF Tagline OPTIONAL

15. Please write a brief tagline (100 characters or less - spaces count as characters) about your repair facility. This will be displayed on the website next to your RERF name.

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SECTION D Facility Classification				
16. Is your facility a dealership?		Yes	No	
17. Do you want to be a 'specialty' shop (only repairsp	ecific Makes)?	Yes	No	
 If you checked Yes for #17, list the vehicle makes (Honda, Toyota) with Fuel Type(s) your specialty shop will repair. 				
18a	Diesel	Non-Diesel		
18b	Diesel	Non-Diesel		
18c	Diesel	Non-Diesel		
18d	Diesel	Non-Diesel		
18e	Diesel	Non-Diesel		
18f	Diesel	Non-Diesel		
18g	Diesel	Non-Diesel		
18h	Diesel	Non-Diesel		
18i	Diesel	Non-Diesel		
18j	Diesel	Non-Diesel		

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 a RERF or other penalties. I agree to notify Massachusetts Vehicle Check within one week of changes in employment. I certify that my facility has the required equipment to be a RERF.

Applicant Signature

Date