(WEB COPY) Toll Violation Appeal Form for Massachusetts Registration Only

E-ZPass MA Violation Processing Center (VPC) PO Box 8001, Auburn, Massachusetts 01501-8001

The Massachusetts Registry of Motor Vehicles has identified you as the registered owner of the vehicle and responsible party for the attached Toll Violation Notice. You may appeal this violation under the provisions of Massachusetts Code of Regulations 730 CMR 7.04. You must appeal the violation <u>in writing</u>, by submitting this form to the Violation Processing Center (VPC) by the Due Date shown below. <u>Late appeals will not be accepted</u>. This Toll Violation Appeal applies only to the violation number you indicated below. (Required Fields*)

*Name:		*Violation Number:	*Violation Number:		
*Address:		*Issuance Date:	*Issuance Date:		
*City, State, Zip:	tate, Zip:*Registration No.:				
Please check one to indicate re	equested appeal method:				
Written Appeal: Fill ou	ut information below and ma	il this form to the VPC			
Request for Hearing (in Auburn, Massachusetts):	Mail this form to the VPC			
Check here ONLY if th	is is your FIRST E-ZPASS	MA VIOLATION OFFENSE			
Submission of this written ap judicial review under Massac	opeal does not waive you chusetts law (M.G.L. c. 3	PEALS CANNOT BE ACCEPTED. It right to a hearing with a MassDOT 0A). Within sixty (60) days of receipt	of your appeal you will receive		
a disposition report from the appeal circumstances is prov		upholding the violation. For your con	ivenience, a list of possible valid		
1.) CHECK HEREIF YO	OUR E-ZPASS ACCOUNT	WAS OPENED IN THE STATE OF MA	SSACHUSETTS		
please call [1-877-627-7745] (se your account information and wi You are then encouraged to appapeal is received by the due days	elect option 3) in order to av ill not relieve you of your obloeal this violation by filling o ate shown above and accep	r service representative to resolve the prooid future violations and fines. <u>Please no ligation to appeal this violation in writing.</u> ut the information below and mailing this sted, you acknowledge (by signing below lation administrative fee will be charged to	Appeal Form to the VPC. If your that the \$50.00 violation fine will		
E-ZPass MA Account Number:					
E-ZPass MA Transponder Num	ber : *021				
2.) CHECK HEREIF YO	OUR E-ZPASS ACCOUNT	WAS NOT OPENED IN THE STATE O	F MASSACHUSETTS		
refer to the agency and phone information below and mailing the name, address, transponder nuraccepted, you acknowledge (by violation administrative fee will be	number listed on your trans nis Appeal Form to the VPC mber, and vehicle registration signing below) that the \$50 pe charged to your E-ZPass are you opened your accoun	rvice representative to resolve the proble sponder. You are then encouraged to apput with a copy of your current E-ZPass staton information. If your appeal is received .00 violation fine will be waived, and that account. In order to avoid future violation it to resolve the problem that led to the vippeal this violation in writing.	peal this violation by filling out the tement, which must include your by the due date shown above and the missed toll amount and a \$5.00 ns and fines, please contact		
		OUTSIDE OF MASSACHUSETTS - WE ON OF AN E-ZPASS ACCOUNT AS DE			
Please sign below. Your signa processed.	ature is required for appea	al to be considered. Appeals received	after the due date will not be		
*Signature	*Print Name	*Phone Number	*Date		

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*Name <u>:</u>		*Violation Number:		
*Address:	dress: *Issuance Date:			
*City, State, Zip:		*Registration:		
	ONLY if this is your FIRST E-ZPASS M			
Check here fo	or Other Circumstances (Non-E-Z	Pass Customer) (Complete n	ext section)	
			ten statement (using the space provided husetts Department of Transportation's	
violation number (show	pace, or are including additional documents and/or other sered. Appeals received after the du	submittals. Please sign below.		
*Signature	*Print Name	*Phone Number	*Date	
	Area below for Leasing	g and Rental Agencies	ONLY	
violation notice was a:	ered owner certifies that, on the date of Leased or Rented Vehicle. For this ap ction 20E and must be provided within	opeal to be considered, all lesse	e/renter information is required by	
	sing/rental company must provide the to the lessee/renter for payment		to be accepted. The violation notice	
*NAME <u>:</u>				
*ADDRESS:				
*CITY <u>:</u>	*ST/	ATE: *ZIP	CODE:	
Please sign below. Y not be processed.	our signature is required for an ap	opeal to be considered. Appe	eals received after the due date will	
	· · · · · · · · · · · · · · · · · · ·			

*Phone Number

*Date

*Signature

*Print Name