



Dear Section 5 Business Partner;

The Massachusetts Registry of Motor Vehicles (RMV) has upgraded to a new system, ATLAS, to deliver exceptional customer service. As part of the upgrade to ATLAS, the system includes a new eServices Portal for Section 5. The eServices Portal will give your users the ability to:

- Apply for a new Section 5 account & upload documentation (New Business only)
- Registration renewal
- Registration replacements
- Replace lost or damaged plate
- Order compliance decals
- Designated Administrators to maintain RMV access for employees

The eServices Portal is an optional tool that you can use to conduct business with the RMV and is easy to use, convenient, and free of charge. If you would like to use this new tool, you will need to designate at least one eServices Administrator. eServices Administrators will have the ability to add/remove users to the portal, reset passwords, and process the transactions listed above.

If you would like access to the new eServices Portal, you must complete and submit the following two attached documents:

- RMV Business Partner Contact Form
 This form is used to collect your most up-to-date business information.
- eServices Administrator Access Form
 This form needs to be completed by each person that you designate as an "eServices Administrator."

Please complete and return the forms to rmvbusinesspartners@dot.state.ma.us

If you have any Section 5 related questions please feel free to call the Section 5 @

857-368-8030 or email Section.5.registry@state.ma.us.

If you have issues logging into the portal, please feel free to call us at 857-368-7930 or email RMVBusinessPartners@dot.state.ma.us.



RMV Business Partner Contact Form

New Business Account Reactivate Account Revised Business Account Contact Info dding a new program to an existing account School Bus only ovide a contact form for each program your will be enrolled) Date: Business Name Legal Business Name DBA Federal Employer ID Number (FEIN) Mailing Address Will are Street City State Zip Code Email Phone # Reason for Access: Business Contact Information Business Contact (The person the RMV will contact regarding issues with the program) Email Phone # Legal Contact (if applicable) Email Phone # Financial Contact (if applicable) Email Phone # Technical Contact (if applicable) Email Phone # Security Contact Information Security Contact #1 Email Security Contact #2 (if applicable) Email Phone # Processing Entity (Only complete this section if you are using a third party processor to access RMV data): Processing Entity Name Contact Name Mailing Address Street City State Zip Code Email Phone #

Note: You are not required to have multiple contacts, the same person could fill multiple roles.

Return form to: RmvBusinessPartners@dot.state.ma.us



eServices Administrator Access Form

RMV Business Partners must designate a Security Administrator(s). The Security Administrator(s) will be able to log into the eServices Portal to:

- · create and terminate security credentials
- · add/delete security roles for both your business in-house end users and permissible external end users, if applicable*.

update role to the insurance agencies end user's credentials provide by the insurance agency.

This form must be completed to receive eService Administrator credentials. The RMV recommends that each business have at least two (2) Administrators, but may approve additional ones if the business has more than fifty (50) end users. Please note that eService Administrators cannot create additional Administrator credentials; these credentials can only be issued by the RMV.

*Insurance Companies only: Insurance Agencies will be responsible for creating/terminating security credentials for all of their end users. If an insurance agency needs access to update policies for your insurance company, your eService Administrator will be able to add the

Type of Request (Check Or	je)		
iew Administrator	Update Adminis	Update Administrator Information	
Business Name			
Legal Business Name	-	D.B.A.	
Federal Employer ID Number	(FEIN)	R^^/ D/	
		Select which program(s)	
Malling Address			
Business or Security Conta	ct Certification and Sign	nature ()	
l,	, hereby	designate the below named individual as an eServices Administrator for this business	
Business or Security Cont	act Signature:	Date:	
Designated eServices Adn	ninistrator information		
Name	<u> </u>	Title	
Email	· .	Phone #	
Last 4 Digits of Social Security Number		Driver License #: If non Mass resident must attach a photo copy of state issued license or ID.	
Type of Access (check one):	Admin Only Adm	nîn & Inquiry. ☐ Admin, înquiry & Update	
eServices Administrator Ce	rtification and Signature		
have been convicted of a f business, I agree that I will	an eServices Administr elony involving violence l abide by all the terms nt security credentials to	s and Data Maintained by the Registry of Motor Vehicles. I understand that, as part of rator, the RMV will conduct a background check on me, and access will be denied if I e, dishonesty, deceit or indecency. As the eService Administrator for the above listed of the Agreement for Access to Records and Data Maintained by the Registry of Moto to permitted users, assign roles to authorized End Users and will deactivate an End nination.	
eServices Administrator's	Signature:	Date:	
All approved eServices Ad	ministrators are require	ed to watch the RMV's Computer Based Training (CBT) for Administrative Access	

issued.