



**THE COMMONWEALTH OF MASSACHUSETTS  
DEPARTMENT OF REVENUE  
DETERMINATION BUREAU - ROOM 303  
100 CAMBRIDGE STREET  
BOSTON, MASSACHUSETTS 02204**

**AFFIDAVIT IN SUPPORT OF A CLAIM FOR EXEMPTION FROM SALES  
OR USE TAX FOR A MOTOR VEHICLE PURCHASED OUTSIDE OF MASSACHUSETTS**

Please read the instructions on the reverse side before completing this form and provide the following information.

**All entries must be printed except for signatures.**

This claim for exemption is based on the purchase of a motor vehicle outside of Massachusetts.

**MOTOR VEHICLE TRANSFERRED:**

Make	Year	Model	Vehicle Identification No.	Title No.
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I, \_\_\_\_\_, the transferee/owner of the above-described vehicle certify  
Name  
that I did not receive, and I am not entitled to receive, a credit or refund of any tax previously paid  
in the state in which I purchased this motor vehicle.

**I declare under the pains and penalties of perjury that I have reviewed this affidavit and the statements I have made in it and declare that they are true.**

Signed,

\_\_\_\_\_ Transferee/Owner

\_\_\_\_\_ Date

**(This Form Has Been Approved By The Commissioner of Revenue and May Be Reproduced.)**

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