

E-ZPass MA Customer Service Center
27 Midstate Drive
Auburn, Massachusetts 01501-1839

1-877-627-7745
1-508-786-5222 (Fax)



www.mass.gov/ezpassma

CHANGE OF INFORMATION FORM

E-ZPASS MA ACCOUNT NUMBER: _____

I, _____, would like to change my...

Section A – Credit/Debit Card Information:

To: Credit/Debit Card #: _____ Exp. Date: ____ - ____ - ____

Note: If you previously had Checking Account Information listed on your account, DO NOT use this form. Please submit an Option Change Form.

Section B – Checking Account Information:

To: Routing#: _____ Account #: _____

Note: If you previously had Credit / Debit Card Information listed on your account, DO NOT use this form. Please submit an Option Change Form.

Section C – NEW Address, Telephone(s) or Email address:

Street Address: _____

City: _____ State: _____ Zip Code: _____

Home Telephone: (____) _____ Business Telephone: (____) _____ Ext _____

Cell Phone: (____) _____ Fax: (____) _____

Email address: _____

Section D – User

I would like to add _____ to my E-ZPASS MA account as an authorized contact person.
(Print First and Last Name)

Section E – PIN (4-digit number)

I would like to change my PIN code to: _____ (4-digit number)

Section F – Vehicle Information changes (*please circle either change or add or delete*):

PLEASE NOTE: If you are participating in either the Tunnel Communities or Tobin Resident Program, you must bring a copy of your vehicle registration to the E-ZPass Customer Service Center located at 145 Havre Street, East Boston, MA 02128.

I would like to change/add/delete my vehicle information to: Do you need extra fastener strips? yes no

NOTE: If you need an additional transponder for any vehicle listed below, please contact the E-ZPass MA Customer Service Center.

Plate# _____ State _____ Plate Type _____ Make _____ Model _____ Year _____

Plate# _____ State _____ Plate Type _____ Make _____ Model _____ Year _____

I authorize the change of information on my account as indicated above, and certify that all information contained on this form is true and accurate.

Signature: _____ **Date:** _____ - _____ - _____