



New Jersey
Motor Vehicle Commission

APPLICATION FOR VEHICLE REGISTRATION

(Please complete both sides – print clearly)

PLATE NUMBER

PREFIX

VEHICLE IDENTIFICATION NUMBER (VIN)

NAME/OWNER NAME					NAME/LEASEE – If the vehicle is being leased for a period of one year or more, the owner must supply the leasee's information. TYUT HHJH SDFS												
STREET ADDRESS ADDRESS ADDRESS					STREET ADDRESS												
CITY CITY		STATE KY		ZIP 56566		COUNTY		CITY STATE ZIP DATE LEASE SIGNED TERM (Months)									
NAME/CO-OWNER			COMMERCIAL REGISTRATION ONLY REQUESTED REGISTRATION CODE:		REQUESTED REGISTRATION WEIGHT OR NUMBER OF PASSENGERS:		LEASE CANCELLATION <input type="checkbox"/>		DATE LEASE CANCEL								
CHECK HERE IF THIS ADDRESS IS CHANGED FROM PREVIOUS RECORDS <input type="checkbox"/>		RENEWAL		INITIAL <input checked="" type="checkbox"/>		DUPLICATE		TRANSFER		REPLACEMENT PLATES		CODE CHANGE		INCREASE IN REG. WEIGHT		WILL THE VEHICLE BE USED AS A RENTAL? YES ___ NO <input checked="" type="checkbox"/>	
OWNER'S N.J. DRIVER LICENSE NUMBER/CORPCODE 6756				MALE <input type="checkbox"/> FEMALE <input type="checkbox"/>		EYE COLOR		FULL DATE OF BIRTH / /				**SOCIAL SECURITY NUMBER - -					
OWNER'S N.J. DRIVER LICENSE NUMBER/CORPCODE				MALE <input type="checkbox"/> FEMALE <input type="checkbox"/>		EYE COLOR		FULL DATE OF BIRTH / /				**SOCIAL SECURITY NUMBER - -					
LEASEE'S N.J. DRIVER LICENSE NUMBER/CORPCODE				MALE <input type="checkbox"/> FEMALE <input type="checkbox"/>		EYE COLOR		FULL DATE OF BIRTH 08 / 20 / 2020				**SOCIAL SECURITY NUMBER - -					
OWNER SIGN HERE								**SUBMISSION OF THE SOCIAL SECURITY NUMBER IS REQUIRED BY N.J.A.C. 13:21-1.3 THE NUMBER WILL BE USED TO PREVENT ERRORS AND ENFORCE FEDERAL AND STATE LAWS IN THE COLLECTION OF MOTOR VEHICLE FEES.									
CO-OWNER SIGN HERE																	
(WE) THE APPLICANT(S) CERTIFY THE STATEMENTS ON BOTH SIDE OF THIS APPLICATION ARE CORRECT. MISSTATEMENTS MAY RESULT IN SUSPENSION OF REGISTRATION PRIVILEGES. APPLICATIONS FOR A REGISTRATION FOR A COMMERCIAL VEHICLE DECLARE KNOWLEDGE OF THE FEDERAL MOTOR CARRIER SAFETY REGULATIONS CONTAINED IN 49 CFR PARTS 390 TO 397.																	