

Universal Title Application



Information - Further Instructions on Second Page

Use this form to apply for a New Jersey Title. The applicant (the person signing this application) must be the owner, lienholder, or an authorized representative of the owner/lienholder. Submit this completed application and all supporting documents in person to your local New Jersey Motor Vehicle Commission (MVC) Agency. All applicants or representatives must submit supporting documents, such as **proof of ownership or authorization**, and must provide **proper identification** when submitting this application.

• Original Documents: These are required when a release of lien is requested or when a Power of Attorney is used.

 Originals or Certified Copies: These are required for court documents, such as divorce decrees and court orders. Photocopies, Faxes, or Scans: These are acceptable for photo identification (ID) 												
Step 1 – Title Transaction Type												
Initial NJ Title (New Owner) ✓ Duplicate Title ✓ Replacement/Corrected Title □ Vessel Title ✓ Add Lien ✓ Remove Lien												
Step 2 – Vehicle Information						Vessel Information						
Vehicle Identif		Hull Identification Number (HIN)										
56789054												
NJ License Plate Number						Year		Make		Fuel Type		
5675												
Year	Make Model					Length (in feet) Hull Ma			ıl			
2134	RTY567	VBGF	456									
Color	Weight	Body T		of Axles	F	Propulsion Typ	ре					
RED 5678 3DOOR 4												
Correction Needed on Vehicle Title (if applicable)						Correction Needed on Vessel Title (if applicable)						
Odometer Information						Check Only if One of These Applies						
Odometer inio	rmation				C.	Sheck Only II One of These Applies						
Odometer Reading (at time of purchase): 65432												
Step 3 – Vehicle/Vessel Owner Information												
Owner Full Name or Entity Name Telephone						mber Driver L			cense or MVC Business Entity Identification Number			
Address				City/Town			State			Zip Code		
Co-Owner First Name (if applicable) Co-				 Owner Last N	Owner Last Name (if applicable)			er Driver License Number (if applicable)				
TESTCOOW			` ''				95432100					
Step 4 – Lienholder Information (Complete ONLY if Adding or Removing a Lien on Vehicle/Vessel)												
Lienholder Name Driver License or MVC Business Entity Identification Number Telephone Number												
VCFS LIEN COMPANY LLC				7654321								
Lienholder Address				City/Town		State		Zip Code	Zip Code			
POBOX 91300,							AL		36691	36691		
Step 5 – Representative Information (Complete ONLY if Representative is NOT the Current Owner or Lienholder)												
First Name				Last Name			Telephone Number					
Address				City/Town			State			Zip Code		
Stop 6 - D	unlicato Titlo	s (Cho	ck All Tha	t Annly a	nd Attach Req	uirod Doc	rumonte	/Proof of	Ownorship	or Lionh	oldor)	
For an Indiv		s (Cite		iness Entit		ulleu Doc	umemo		_ienholder	OI LIGITII	oluei)	
				noto Identification					d Photo Identification			
				istration or Insurance Card (Currer			or		n Contract or Lease Agreement			
Card (Current or Expired) Expired				•					n Release Letter (if applicable)			
				of Attorney	of Attorney and/or Letter of Author				ver of Attorney and/or Letter of			
applicable) Entity (I				Both Must	Be Notarized ar	nd Original)		norization fror		Both Must	
Be Notarized and Original)												
Step 7 – Recipient Information (For Mail In Applications ONLY – Initial Titles Excluded) Method of Return – YOU MUST INCLUDE A PREPAID RETURN AIR BILL WITH YOUR APPLICATION WHEN US MAIL IS NOT SELECTED*												
		/IUST IN	ICLUDE A		KETURN AIR BIL	LL WITH YO		LICATION		AIL IS NO	I SELECTED"	
Mailing Addres	SS			City/Town			State		Zip Code			
				L			<u> </u>					
☐ US Mail				☐ Fede	☐ Federal Express		□ UPS		□ Other			
Step 8 – Certification and Signature(s)												
I, the undersigned, hereby certify that the above statements made by me are true. I am aware that if any of the above statements made by me are willfully false, I am												
				subject to	o civil, criminal, and	d administrat	ive penalti	es.				
Signature of Representative, Owner, or Lienholder Signature of Co-Owner (if applicable) Date												
Motor Vehicle Commission Use Only:												
Clerk Initials: NMVTIS Checked:						Transacti	ion Numb	per:				
Check Number and Amount:						Tracking Number						
Cneck Num		Tracking Number:										