New Jersey Motor Vehicle Commission NAME/OWNER APPLICATION FOR VEHICLE REGISTRATION (Please complete both sides – print clearly) STREET ADDRESS						NUMBER	VEHICLE IDENTIFICATION NUMBER (VIN)					
						NAME/LEASEE – If the vehicle is being leased for a period of one year or more, the owner, must supply the leasee's information, STREET ADDRESS						
NAME/CO-OWNER		RCIAL REGISTRATION ONLY STED REGISTRATION CODE:			REQUESTED REGISTRATION WEIGHT LEASE OR NUMBER OF PASSENGERS:			E CANCELLATION DATE LEASE CANCEL		TE LEASE CANCEL		
CHECK HERE IF THIS ADDRESS IS CHANGED FROM PREVIOUS RECORDS	INITAL	DUPLICATE	TRANSFER	REPLACEM	ENT PLATES	LATES CODE CHANGE INCREASE IN REG. WEIGHT			WILL THE VEHICLE BE USED AS A RENTAL? YESNO			
OWNER'S N.J. DRIVER LICENSE NUMBER/CORPCODE	MALE FEMALE		EYÉ COLOR	FULL DATE O	F BIRTH /	/		"SOCIAL SECURITY NUMBER				
OWNER'S N.J. DRIVER LICENSE NUMBER/CORPCODE	MALE FEMALE				L DATE OF BIRTH			"SOCIAL SECURITY NUMBER				
LEASEE'S N.J. DRIVER LICENSE NUMBER/CORPCODE	MALE FEMALE				L DATE OF BIRTH			"SOCIAL SECURITY NUMBER				
OWNER SIGN HERE									RED BY N.J.A.C. 13:21-1 LAWS IN THE COLLECT			
CO-OWNER SIGN HERE												
(WE) THE APPLICANT(S) CERTIFY THE STATEMENTS I COMMERCIAL VEHICLE DECLARE KNOWLEDGE OF THE								ATION PRIVIL	EGES APPLICATIONS F	OR A REC	SISTRATION FOR A	
3A-49 (R6/15)												