

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

Vehicle Identification Number (VIN)				Hull Identification Number (HIN)			
NJ License Plate Number				Year	Make	Fuel Type	
Year	Make	Model		Length (in feet)	Hull Material		
Color	Weight	Body Type	No. of Axles	Propulsion Type			
Correction Needed on Vehicle Title (if applicable)				Correction Needed on Vessel Title (if applicable)			

Odometer Information

Check Only if One of These Applies

Odometer Reading (at time of purchase): _____ ☐ (N) – Not actual mileage ☐ (M) – Mileage has exceeded mechanical limitations

Step 3 – Vehicle/Vessel Owner Information

Owner Full Name or Entity Name		Telephone Number		Driver License or MVC Business Entity Identification Number	
Address		City/Town		State	Zip Code
Co-Owner First Name (if applicable)		Co-Owner Last Name (if applicable)		Co-Owner Driver License Number (if applicable)	

Step 4 – Lienholder Information (Complete ONLY if Adding or Removing a Lien on Vehicle/Vessel)

Lienholder Name NAMELEIN		Driver License or MVC Business Entity Identification Number BNGTTG6676		Telephone Number	
Lienholder Address ADDRESSLIEN, ADDRESS2, CITY LEIN		City/Town CITY LEIN	State KS	Zip Code 55662	

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

Step 6 – Duplicate Titles (Check All That Apply and Attach Required Documents/Proof of Ownership or Lienholder)

For an Individual <input type="checkbox"/> Valid Photo Identification <input type="checkbox"/> NJ Registration or Insurance Card (Current or Expired) <input type="checkbox"/> Lien Release Letter (if applicable)	For a Business Entity <input type="checkbox"/> Valid Photo Identification <input type="checkbox"/> NJ Registration or Insurance Card (Current or Expired) <input type="checkbox"/> Power of Attorney and/or Letter of Authorization from Entity (Both Must Be Notarized and Original)	For a Lienholder <input type="checkbox"/> Valid Photo Identification <input type="checkbox"/> Loan Contract or Lease Agreement <input type="checkbox"/> Lien Release Letter (if applicable) <input type="checkbox"/> Power of Attorney and/or Letter of Authorization from Entity (Both Must Be Notarized and Original)
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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***

Mailing Address		City/Town		State	Zip Code
<input type="checkbox"/> US Mail		<input type="checkbox"/> Federal Express		<input type="checkbox"/> UPS	<input type="checkbox"/> 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 civil, criminal, and administrative penalties.

Signature of Representative, Owner, or Lienholder

Signature of Co-Owner (if applicable)

Date

Motor Vehicle Commission Use Only:

Clerk Initials:	NMVTIS Checked:	Transaction Number:
Check Number and Amount:		Tracking Number: