

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)
98765678990

NJ License Plate Number

Year Make Model

Color Weight Body Type No. of Axles

Correction Needed on Vehicle Title (if applicable)

Vessel Information

Hull Identification Number (HIN)

Year Make Fuel Type

Length (in feet) Hull Material

Propulsion Type

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
SESEF REFEDGD

Address City/Town State Zip Code
QWRDWEQR SFESDF SDFSDF IN 345345

Co-Owner First Name (if applicable) Co-Owner Last Name (if applicable) Co-Owner Driver License Number (if applicable)
COLAST

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
LEIN TEST DETAILS CORP CODE

Lienholder Address City/Town State Zip Code
ADDRESS TEST, ADREESS4, CITY, KS, CITY KS 677677

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	For a Business Entity	For a Lienholder
<input type="checkbox"/> Valid Photo Identification	<input type="checkbox"/> Valid Photo Identification	<input type="checkbox"/> Valid Photo Identification
<input type="checkbox"/> NJ Registration or Insurance Card (Current or Expired)	<input type="checkbox"/> NJ Registration or Insurance Card (Current or Expired)	<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)	<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)

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

☐ US Mail ☐ 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 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: