



NEW JERSEY MOTOR VEHICLE COMMISSION

VEHICLE CORRECTION APPLICATION

Please print or type all correct information

Plate No. _____

Reg. Code _____

Exp. Date _____

SERIAL NUMBER: 5555555 _____

OWNER INFORMATION

DRIVER LICENSE #: 66666666 _____

Name NAME _____

Address ADD1 ADD2 _____

City CITY _____ State NJ _____

Zip 654321 _____

VEHICLES

BOATS

Veh. Type 2DRCOUP Boat Type _____

Make RTYF Make _____

Year 3432 Year _____

Model GG56 Model _____

Mileage 7654567 _____

Color RED Material _____

GW/NP/WC Length _____

Axles 4 Propulsion _____

Fuel _____

CO-OWNER INFORMATION (If Any):

DRIVER LICENSE #: 7654323456789 _____

Name NAMECO MIDCO LASTCO _____

LIEN HOLDER (If Any):

Name LESSOR STAGING _____

Address ADDRESS TO SOUTH, ADDRESS 2 NORTH _____

City CITY TEST _____ State GA _____

Zip 76555 _____

I certify the Statements on this application are true and correct.

Signature _____ Date _____

AGENCY USE ONLY

Title
Surrendered ☐ Y ☐ N

Document
Print? ☐ Y ☐ N