Mew Jersey Motor Vehicle Commission APPLICATION FOR VEHICLE REGISTRATION (Please complete both sides – print clearly)			PLATE	PLATE NUMBER PREFIX		EFIX	VEHICLE IDENTIFICATION NUMBER (VIN)		
NAME/OWNER				NAME/LEASEE – If the vehicle is being leased for a period of one year or more, the owner,must supply the leasee's information,					
ABEFCU				ABEFCU					
STREET ADDRESS				STREET ADDRESS					
PO BOX 4002				₱O BOX 4002					
CITY STATE ZIP COUNTY			CITY		STATE	ZIP	DATE LEASE SIGNED	TERM (Months)	
ANSONIA STAT NY 10023				10023					
NAME/CO-OWNER COMMERCIAL REGISTRATION ONLY			REQUE	REQUESTED REGISTRATION WEIGHT LEASE CANCELLATION				DATE LEASE CANCEL	
REQUESTED REGISTRATION CODE:			OR NUI	BER OF PASSENGE	RS:				
CHECK HERE IF THIS ADDRESS RENEWAL INITAL IS CHANGED FROM PREVIOUS RECORDS	DUPLICATE TRANSFE	R REPLACEMEN	T PLATES	CODE CHANGE			WILL THE VEHICLE BE USED AS A RENTAL? YESNO		
			ULL DATE OF	BIRTH		"SOCIAL SECURITY NUMBER			
006338000100230	FEMALE			/					
OWNER'S N.J. DRIVER LICENSE NUMBER/CORPCODE MALE EYE COLOR FU		ULL DATE OF	BIRTH		"SOCIAL SECURITY NUMBER				
FEMALE			/	/	H H				
LEASEE'S N.J. DRIVER LICENSE NUMBER/CORPCODE MALE EYE COLOR FUL			ULL DATE OF	BIRTH		"SOCIAL SECURITY NUMBER			
FEMALE				/	/		-	-	
OWNER SIGN HERE							ED BY N.J.A.C. 13:21-1.3 THE AWS IN THE COLLECTION O		
CO-OWNER SIGN HERE									
(WE) THE APPLICANT(S) CERTIFY THE STATEMENTS ON BOTH SIDE COMMERCIAL VEHICLE DECLARE KNOWLEDGE OF THE FEDERAL N						RATION PRIVILE	GES APPLICATIONS FOR A	REGISTRATION FOR A	
BA-49 (R6/15)									