

New Jersey
Motor Vehicle Commission

APPLICATION FOR VEHICLE REGISTRATION
(Please complete both sides – print clearly)

PLATE NUMBER
PLATE

PREFIX

VEHICLE IDENTIFICATION NUMBER (VIN)
VINMJ322344455

NAME/OWNER UMI					NAME/LEASEE – If the vehicle is being leased for a period of one year or more, the owner must supply the leasee's information. NEWW DATE				
STREET ADDRESS ADREESS ADDRESS22					STREET ADDRESS				
CITY CITY		STATE ID		ZIP 235345		COUNTY			
NAME/CO-OWNER		COMMERCIAL REGISTRATION ONLY REQUESTED REGISTRATION CODE:			REQUESTED REGISTRATION WEIGHT OR NUMBER OF PASSENGERS:		LEASE CANCELLATION <input type="checkbox"/>		
CHECK HERE IF THIS ADDRESS IS CHANGED FROM PREVIOUS RECORDS <input type="checkbox"/>		RENEWAL		INITIAL <input checked="" type="checkbox"/>		DUPLICATE <input checked="" type="checkbox"/>		TRANSFER	
						REPLACEMENT PLATES		CODE CHANGE	
						INCREASE IN REG. WEIGHT		WILL THE VEHICLE BE USED AS A RENTAL? YES ___ NO <input checked="" type="checkbox"/>	
OWNER'S N.J. DRIVER LICENSE NUMBER/CORPCODE CORP65656				MALE <input type="checkbox"/> FEMALE <input type="checkbox"/>		EYE COLOR		FULL DATE OF BIRTH / /	
OWNER'S N.J. DRIVER LICENSE NUMBER/CORPCODE 456546				MALE <input type="checkbox"/> FEMALE <input type="checkbox"/>		EYE COLOR		FULL DATE OF BIRTH / /	
LEASEE'S N.J. DRIVER LICENSE NUMBER/CORPCODE				MALE <input type="checkbox"/> FEMALE <input type="checkbox"/>		EYE COLOR		FULL DATE OF BIRTH / /	
OWNER SIGN HERE					**SUBMISSION OF THE SOCIAL SECURITY NUMBER IS REQUIRED BY N.J.A.C. 13:21-1.3 THE NUMBER WILL BE USED TO PREVENT ERRORS AND ENFORCE FEDERAL AND STATE LAWS IN THE COLLECTION OF MOTOR VEHICLE FEES.				
CO-OWNER SIGN HERE									
(WE) THE APPLICANT(S) CERTIFY THE STATEMENTS ON BOTH SIDE OF THIS APPLICATION ARE CORRECT. MISSTATEMENTS MAY RESULT IN SUSPENSION OF REGISTRATION PRIVILEGES. APPLICATIONS FOR A REGISTRATION FOR A COMMERCIAL VEHICLE DECLARE KNOWLEDGE OF THE FEDERAL MOTOR CARRIER SAFETY REGULATIONS CONTAINED IN 49 CFR PARTS 390 TO 397.									