New Jersey Motor Vehicle Commission  APPLICATION FOR VEHICLE REGISTRATION (Please complete both sides – print clearly)  NAME/OWNER  STREET ADDRESS								PLATE NUMBER PREFIX			VEHICLE IDENTIFICATION NUMBER (VIN)			
								NAME/LEASEE – If the vehicle is being leased for a period of one year or more, the owner, must supply the leasee's information,  LEE  STREET ADDRESS						
NAME/CO-OWNER		CIAL REGISTRATION ONLY TED REGISTRATION CODE:				REQUESTED REGISTRATION WEIGHT OR NUMBER OF PASSENGERS:			SE CANCELLATION DATE LEASE CANCEL					
IS CHANGED FROM PREVIOUS RECORDS	RENEWAL	INITAL	DUPLICATE	TRANSFER	REPLACE	MENT P	LATES	CODE CHANGE	INCREASE IN R	EG WEIGHT	WILL THE VEHICLE BE USED AS A RENTAL? YESNO			
OWNER'S N.J. DRIVER LICENSE NUMB	MALE FEMALE		EYÉ COLOR	FUL	L DATE OF	DATE OF BIRTH / /			"SOCIAL SECURITY NUMBER					
OWNER'S N.J. DRIVER LICENSE NUMB	MALE FEMALE				L DATE OF BIRTH  8 / 20 / 2020			**SOCIAL SECURITY NUMBER						
LEASEE'S N.J. DRIVER LICENSE NUMB	MALE FEMALE				FULL DATE OF BIRTH / /			"SOCIAL SECURITY NUMBER						
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 COMMERCIAL VEHICLE DECLARE KNO										TRATION PRIVI	EGES APPLICATIONS	FOR A REC	SISTRATION FOR A	
3A-49 (R6/15)														