



# NEW JERSEY MOTOR VEHICLE COMMISSION

## VEHICLE CORRECTION APPLICATION

Please print or type all correct information

Plate No. \_\_\_\_\_

Reg. Code \_\_\_\_\_

Exp. Date \_\_\_\_\_

SERIAL NUMBER: VINMJ322344455 \_\_\_\_\_

### OWNER INFORMATION

DRIVER LICENSE #: \_\_\_\_\_

Name UMI \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_

Zip \_\_\_\_\_

### VEHICLES

### BOATS

Veh. Type 3DOOR Boat Type \_\_\_\_\_

Make MAKE Make \_\_\_\_\_

Year 54 YR Year \_\_\_\_\_

Model MODEL Model \_\_\_\_\_

Mileage ODO113 \_\_\_\_\_

Color BLACK Material \_\_\_\_\_

GW/NP/WC Length \_\_\_\_\_

Axles 8 Propulsion \_\_\_\_\_

Fuel \_\_\_\_\_

### CO-OWNER INFORMATION (If Any):

DRIVER LICENSE #: 456546 \_\_\_\_\_

Name FIRST MIDDLE LAST \_\_\_\_\_

### LIEN HOLDER (If Any):

Name FARAZ TEST \_\_\_\_\_

Address ADDRREESS34 , ADDREDGT \_\_\_\_\_

City CITY State IA \_\_\_\_\_

Zip 5645656 \_\_\_\_\_

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

Signature \_\_\_\_\_ Date \_\_\_\_\_

### AGENCY USE ONLY

Title  
Surrendered ☐ Y ☐ N

Document  
Print? ☐ Y ☐ N