APPLICATION FOR DUPLICATE CERTIFICATE OF OWNERSHIP

STATE OF NEW JERSEY
MOTOR VEHICLE COMMISSION
SPECIAL SERVICES
P.O. BOX 017
TRENTON, NEW JERSEY 08666-0017
(609) 292-6500 EXT. 5074

ABOVE SPACE IS FOR OFFICE USE ONLY

INSTRUCTIONS- PLEASE READ CAREFULLY

- 1. This form is to be completed by the titled owner(s). Please type or print clearly.
- 2. A \$60.00 check or money order (Do Not Send Cash) and a copy of the current or expired registration certificate or insurance identification card and proof of identity (copy of driver's license) must accompany the application. Mail all information to the Trenton Central Office or bring in person to any motor vehicle agency.

	_	PENICE NI IMPED/IE BI ISM			
				SEX	
ADDRESS		ETE COLOR			
ADDICESS	NO. AND STREET		CITY	STATE	ZIP CODE
PHONE: (HOME	E)	(CELL)		(WORK)	
				DRESS)?	
F CO-OWNER:					
1a.	NAME OF CO-OWI	NER			
DA ⁻	TE OF BIRTH	EYE COLOR		SEX	
			DESCRIPTION O		
2. LICENSE PL	ATE NO	MAKE	YEAR	BODY TYPE	MODEL
		MPLETE VEHICLE IDENT			
3. ARE THER	E ANY ENCUMBRA	NCES OR LIENS AGAINST	THE VEHICLE AT	THIS PRESENT TIME? YES_	NO
IF "YES", GIVE I	NAME AND ADDRE	SS OF LIENHOLDER NE	EW A ADRE	RESS CITY LA LA	
NOTE: If the or	iginal certificate w	as issued subject to lien	and lienholder h	as not submitted evidence of	satisfaction, a duplicate certificate
of ownership w	vill not be issued u	ntil proof of payment is	received from th	elienholder.	
*If banks have	merged it must be	stated on Lien Release.			
				IT AND (IF APPLICABLE) POWE	R OF ATTORNEY.
certificate of o	wnership, or title p	Isely states, in any applic papers, are lost, shall be imprisonment for a tern	subject to a fine	of not less than two hundred	te certificate of ownership, that a dollars (\$200.00) nor more than
This application	n is submitted to th	ne Chief Administrator c	of the Motor Veh	icle Commission because the	whereabouts of the title paper for
the motor vehi	icle described here	in- owned by the unders	signed <u>IS UNKNO</u>	WN and certification is hereby	made that it <u>IS LOST</u> .
It is further cer	rtified that the		24245	VEHICLE IDENTIFICATION	DAL NO
		YEAR			
was physically	examined by me a	nd the identification nul	mber is as entere	d nereon. I certify that I have	compared this number with the
					ate of Ownership and they agree.
further certify	that I have read an	id understand this applic	cation and that al	statements are correct.	
DATE	SIGNATUR	E OF TITLED OWNER		DATE	SIGNATURE OF CO-OWNER
		#= = + = THE = CO	NOICATE IF COR	CONTINUE CIVIL TITLE OF OFF	ICED\
		(IF PARTNERSHIP, SO I	NDICATE, IF COR	PORATION, GIVE TITLE OF OFF	ICER)

IF NOT FILLED IN ENTIRELY AND ACCOMPANIED BY CHECK OR MONEY ORDER FOR \$60.00 (DO NOT SEND CASH) AND PROOF OF IDENTITY (COPY OF DRIVER'S LICENSE) THIS APPLICATION WILL BE REJECTED.