

Universal Title Application



Information - Further Instructions on Second Page

Use this form to apply for a New Jersey Title. The applicant (the person signing this application) must be the owner, lienholder, or an authorized representative of the owner/lienholder. Submit this completed application and all supporting documents in person to your local New Jersey Motor Vehicle Commission (MVC) Agency. All applicants or representatives must submit supporting documents, such as proof of ownership or authorization, and must provide proper identification when submitting this application.

- Original Documents: These are required when a release of lien is requested or when a Power of Attorney is used.

| Originals or Certified Copies: These are required for court documents, such as divorce decrees and court orders. Photocopies, Faxes, or Scans: These are acceptable for photo identification (ID) | | | | | | | | | | | | | | |
|--|--------------------|---------|----------------------------------|------------------|--|------------------|----------------------------------|---|------------------|---|--------------------------------------|---------|---------|--|
| Step 1 – Title Transaction Type | | | | | | | | | | | | | | |
| ☑ Initial NJ Title (New Owner) ☑ Duplicate Title ☑ Replacement/Corrected Title □ Vessel Title ☑ Add Lien ☑ Remove Lien | | | | | | | | | | | | | | |
| Step 2 – Vehicle Information | | | | | | | | Vessel Information | | | | | | |
| | cation Number (VIN | l) | | | | | Hull Identification Number (HIN) | | | | | | | |
| VIN65677567 | | | | | | | | 1 | | | | | | |
| NJ License Pla | | Year | | | Make | | Fuel Type | | | | | | | |
| PLATE67 | | | | | | | | | | | | | | |
| Year | Make | | | Length (in feet) | | | Hull Material | l | | | | | | |
| YEAR | MAKE122 | | L878 | | | | | | | | | | | |
| Color | Weight | Body T | | No. c | of Axles | | Propulsion Type | | | | | | | |
| GREY | WEIGHT | | | | | | | | | | | | | |
| Correction Needed on Vehicle Title (if applicable) | | | | | | | | Correction Needed on Vessel Title (if applicable) | | | | | | |
| Odometer Information | | | | | | | | Check Only if One of These Applies | | | | | | |
| Odometer Reading (at time of purchase): ODOMETER 25 | | | | | | | | | | | | | | |
| Step 3 – Vehicle/Vessel Owner Information | | | | | | | | | | | | | | |
| Owner Full Name or Entity Name ADDMEASLESSOR | | | | | | Telephone Number | | | | Driver License or MVC Business Entity Identification Number 678905432 | | | | |
| Address | | | | | City/Town | | State | | | Zip Code | | | | |
| ADD1 ADDD2 Co-Owner First Name (if applicable) Co-G | | | | | ADDCI: | .\ | AR | | Driver Licens | 45678 | | | | |
| CO-OWNERF | | | | | | , | | | | er Driver License Number (if applicable) 45345 CO $-$ WN | | | | |
| Step 4 - L | ienholder Info | rmatio | n (Co | mple | ete ONLY | if Adding o | r Removii | ng a Li | ien o | n Vehicle | e/Vessel) | | | |
| Lienholder Nar | | | · | | Driver Lice | nse or MVC Busir | ness Entity Ide | ntificatio | n Num | ber | Telephone Nun | nber | | |
| LEIN STA | AGING | 556565 | | | | | | | | | | | | |
| Lienholder Address | | | | | City/Town | | State | | | Zip Code | | | | |
| ADDRESS1, ADDRESS2 | | | | | CITY | | HI | | | INITIAL | | | | |
| Step 5 - R | epresentative | Inforr | nation | (Co | mplete C | NLY if Repr | esentativ | e is NC | OT th | e Curren | t Owner or | Lienho | der) | |
| First Name | | | | | Last Name | | | | Telephone Number | | | | | |
| Address | | | | | O't o'T annua | | | State | | | Zip Code | | | |
| Address | | | | | City/Town | | | State | | | Zip Code | | | |
| Stop 6 D | uplicate Titles | c (Cho | ok All ' | That | Annly a | nd Attach D | oquirod D | oouma | ntc/ | Droof of | Ownerchin | or Lion | holder) | |
| | | s (Cite | | | | | equireu D | ocume | #1115/I | | ienholder | or Lien | noider) | |
| For an Individual ☐ Valid Photo Identification ☐ Valid P | | | | | ness <u>⊨nuty</u> hoto Identification | | | | | | d Photo Identification | | | |
| | | | | | istration or Insurance Card (Curre | | | nt or | | | n Contract or Lease Agreement | | | |
| Card (Current or Expired) Expired | | | | _ | , | | | | | | en Release Letter (if applicable) | | | |
| ☐ Lien Release Letter (if ☐ Power | | | | | , | r of Authori | f Authorization from | | | | | | | |
| | | | | | | Be Notarized | | and Original) | | | Authorization from Entity (Both Must | | | |
| Be Notarized and Original) | | | | | | | | | | | |) | | |
| | ecipient Infor | | | | | | | | | | | | | |
| Method of Return - YOU MUST INCLUDE A PREPAID RETURN AIR BILL WITH YOUR APPLICATION WHEN US MAIL IS NOT SELECTED* | | | | | | | | | | | | | | |
| Mailing Addres | ss | | | | City/Town | | | St | tate | | Zip Code | | | |
| | | | | | | | | | | | | | | |
| □ US Mail | | | | | ☐ Fede | eral Express | | □UPS | | PS | | ☐ Othe | r | |
| Step 8 – Certification and Signature(s) | | | | | | | | | | | | | | |
| I, the undersigned, hereby certify that the above statements made by me are true. I am aware that if any of the above statements made by me are willfully false, I am | | | | | | | | | | | | | | |
| | | | | | subject to | civil, criminal, | and administ | rative pe | nalties | s. | | | | |
| · | | | | | | | | | | | | | | |
| s | older | Signa | ture of Co-Owner (if applicable) | | | | | Date | | | | | | |
| Motor Vehicle Commission Use Only: | | | | | | | | | | | | | | |
| Clerk Initials: NMVTIS Checked: | | | | | | | | Transaction Number: | | | | | | |
| Check Number and Amount: | | | | | | | | Tracking Number: | | | | | | |