## 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.

1. NAME OF TITLED OWNER					
OWNER'S NEW JERSEY DRIVER					
DATE OF BIRTH					
NO. AND STREET		CITY		STATE	ZIP CODE
PHONE: (HOME)	(CELL)			(WORK)	
WHERE DO YOU WANT THE TI	TLE MAILED (IF DIFFERENT T	HAN ABOVE ADD	RESS)?		
IF CO-OWNER:					
1a. NAME OF CO-C	OWNER				4
NEW JERSEY DRIVE	ER LICENSE NUMBER 34:	32424			
DATE OF BIRTH	EYE COLOR BROV	MN	SEX	FEMALE	
( <del></del>					
	D	ESCRIPTION OF	<b>VEHICL</b>	E	
2. LICENSE PLATE NO	MAKE	YEAR	BOD	Y TYPE	MODEL
WEIGHT CLASS					
3. ARE THERE ANY ENCUME	- Brances or Liens Against	THE VEHICLE AT	THIS PRES	SENT TIME? YES	NO <b>Z</b>
IF "YES", GIVE NAME AND ADD					
NOTE: If the original certificate	e was issued subject to lien	and lienholder ha	s not sub	mitted evidence of	satisfaction, a duplicate certificate
of ownership will not be issue					, .
*If banks have merged it must					
*LIENHOLDERS MUST SUPPLY		FASE AGREEMEN	L AND (IE	APPLICABLE) POWE	R OF ATTORNEY.
- FIEMHOLDERS MOST SOFFET	A COPT OF CONTRACT OR E	LASE AGREEMEN	AITE (II	ATTENDELTTOTTE	
R.S. 39:10-12 "A person who	falsely states, in any applic	ation to the <b>Chief</b>	Adminis	trator for a duplicat	e certificate of ownership, that a
certificate of ownership, or tit	le papers, are lost, shall be s	subject to a fine o	f not less	than two hundred	dollars (\$200.00) nor more than
five hundred dollars (\$500.00)	or imprisonment for a term	not exceeding th	irty days	or both."	
This application is submitted t	o the <b>Chief Administrator o</b>	f the Motor Vehic	le Comn	nission because the	whereabouts of the title paper for
the motor vehicle described h	erein- owned by the unders	igned <u>IS UNKNOV</u>	VN and c	ertification is hereby	made that it <u>IS LOST</u> .
in the formula and a second the state of the					
It is further certified that the	YEAR	MAKE		VEHICLE IDENTIFICATION	ON NO.
was obveically avamined by m			hereon.	Leertify that I have	compared this number with the
was physically examined by it	es of augustahin and an my	application for a	dunlicate	New Jersey Certific	ate of Ownership and they agree.
					ate of ownership and they agree.
further certify that I have read	and understand this applica	ation and that all	statemei	its are correct.	
DATE SIGNA	TURE OF TITLED OWNER		DATE	_	IGNATURE OF CO-OWNER
	//= = 1 = THE DOLLIE CO.	UDICATE IF CORD	ODATION	CIVE TITLE OF OFF	ICED\
	(IF PARTNERSHIP, SO II	NDICATE, IF CORP	UKATION	I, GIVE THE OFOR	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.