



# NEW JERSEY MOTOR VEHICLE COMMISSION

## VEHICLE CORRECTION APPLICATION

Please print or type all correct information

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

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

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

SERIAL NUMBER: GGGGHHH \_\_\_\_\_

### OWNER INFORMATION

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

Name ERSDVDSFSD ESFCSDF \_\_\_\_\_

Address \_\_\_\_\_

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

Zip \_\_\_\_\_

### VEHICLES

### BOATS

Veh. Type 4DOOR \_\_\_\_\_ Boat Type \_\_\_\_\_

Make WEDFE \_\_\_\_\_ Make \_\_\_\_\_

Year WEF \_\_\_\_\_ Year \_\_\_\_\_

Model WEFWE \_\_\_\_\_ Model \_\_\_\_\_

Mileage SAFSDF \_\_\_\_\_

Color ORANGE \_\_\_\_\_ Material \_\_\_\_\_

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

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

Fuel \_\_\_\_\_

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

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

Name NAME MIDDLE NAME LAST NAME \_\_\_\_\_

### LIEN HOLDER (If Any):

Name SADFSDF \_\_\_\_\_

Address SDFSDF, THRTGH, ESFEW, IN, 32423 \_\_\_\_\_

City ESFEW \_\_\_\_\_ State IN \_\_\_\_\_

Zip 32423 \_\_\_\_\_

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

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

### AGENCY USE ONLY

Title  
Surrendered ☐ Y ☐ N

Document  
Print? ☐ Y ☐ N