



NEW JERSEY MOTOR VEHICLE COMMISSION

VEHICLE CORRECTION APPLICATION

Please print or type all correct information

Plate No. _____

Reg. Code _____

Exp. Date _____

SERIAL NUMBER: ZAM57YTA4K1328390

OWNER INFORMATION

DRIVER LICENSE #: W2068 68983 56514

Name JP MORGAN CHASE BANK

Address 212 CENTRE ST

City BEACH HAVEN State NJ

Zip 08008

VEHICLES

BOATS

Veh. Type 4DSD Boat Type _____

Make MASERATI Make _____

Year 2019 Year _____

Model M 157 Model _____

Mileage 26

Color BK Material _____

GW/NP/WC _____ Length _____

Axles 2 Propulsion _____

Fuel _____

CO-OWNER INFORMATION (If Any):

DRIVER LICENSE #: _____

Name _____

LIEN HOLDER (If Any):

Name JP MORGAN CHASE BANK

Address PO BOX 901098, FT WORTH, TX, 76101

City FT WORTH State TX

Zip 76101

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

Signature _____ Date _____

AGENCY USE ONLY

Title
Surrendered ☐ Y ☐ N

Document
Print? ☐ Y ☐ N