



# NEW JERSEY MOTOR VEHICLE COMMISSION

## VEHICLE CORRECTION APPLICATION

Please print or type all correct information

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

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

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

SERIAL NUMBER: 9876543210000 \_\_\_\_\_

### OWNER INFORMATION

DRIVER LICENSE #: 543267890 \_\_\_\_\_

Name ADDMEASLESSOR \_\_\_\_\_

Address ADD1 ADDD2 \_\_\_\_\_

City CITYADD \_\_\_\_\_ State CT \_\_\_\_\_

Zip 5678 \_\_\_\_\_

### VEHICLES

### BOATS

Veh. Type 2DRCOUP \_\_\_\_\_ Boat Type \_\_\_\_\_

Make \_\_\_\_\_ Make \_\_\_\_\_

Year 2134 \_\_\_\_\_ Year \_\_\_\_\_

Model TYU576 \_\_\_\_\_ Model \_\_\_\_\_

Mileage 7654321 \_\_\_\_\_

Color WHITE \_\_\_\_\_ Material \_\_\_\_\_

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

Axles 6 \_\_\_\_\_ Propulsion \_\_\_\_\_

Fuel \_\_\_\_\_

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

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

Name TEST OENETR \_\_\_\_\_

### LIEN HOLDER (If Any):

Name TEST \_\_\_\_\_

Address ADDRESS5, RRFV \_\_\_\_\_

City CITY \_\_\_\_\_ State MA \_\_\_\_\_

Zip 3434 \_\_\_\_\_

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

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

### AGENCY USE ONLY

Title  
Surrendered ☐ Y ☐ N

Document  
Print? ☐ Y ☐ N