

Purchase Price \$	789	\$
Sales/Use Tax \$		
Ex. Code		Initials

**NJ Motor Vehicle Commission**  
**Special Services Titles**  
**P.O. Box 017**  
**Trenton, NJ 08666-0017**

### APPLICATION FOR CERTIFICATE OF OWNERSHIP

PLEASE DESCRIBE THE VEHICLE ACCURATELY				
MAKE OF VEHICLE (PRINT)	MODEL	YEAR	COLOR	BODY TYPE
MAKING IN NY	MODEL SPECIF	12 YEAR	WHITE C	2DR COUP G
COMPLETE VEHICLE IDENTIFICATION NUMBER (NOT THE MOTOR NUMBER)			NO. OF AXLES	
TGHGTYRH			12	

#### ODOMETER READING

E	A	D	I	N	G	TENTHS	
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PLEASE CHECK  
 "YES" OR "NO"

Does your vehicle now have a lien? (Is your vehicle financed?) ☒ Yes ☐ No

If you checked "yes" PRINT name and address of bank or finance company below. If you checked "No", print 'NONE' in the box below.

LIENHOLDER	NAME OF BANK OR FINANCE COMPANY (LIENHOLDER), IF NO LIEN PRINT "NONE"
	AAAAA
	LIENHOLDER CORPCODE
	STREET ADDRESS OF LIENHOLDER
	AAAA, AAAAA, HI,

#### NAME AND ADDRESS OF OWNER AND CO-OWNER BELOW

OWNER	NAME	OWNER NAME		
	N.J. DRIVER LICENSE NO. (IF BUSINESS-CORPCODE)			
	DATE OF BIRTH	EYE COLOR	SEX	
	STREET			
	CITY, STATE, ZIP CODE			
CO-OWNER	NAME	VERONICA LUNA LODGE		
	N.J. DRIVER LICENSE NO. (IF BUSINESS-CORPCODE)	345346456456		
	DATE OF BIRTH	EYE COLOR	SEX	
	05-05-1998	BROWN	FEMALE	
	STREET	RIVERDALE STREET		
	CITY, STATE, ZIP CODE	PLYMOUTH, NY, 85205		

**STATEMENT OF APPLICANT(S):** The undersigned hereby certifies all of the above to be true and correct and that the identification numbers shown on this form has been compared to the identification number on the motor vehicle and further certifies that they agree in every particular.

**SIGN  
HERE**

x \_\_\_\_\_  
 OWNER DATE

**SIGN  
HERE**

x \_\_\_\_\_  
 CO-OWNER (if any) DATE

**SIGN  
HERE**

x \_\_\_\_\_  
 CO-OWNER (if any) DATE

**SIGN  
HERE**

x \_\_\_\_\_  
 CO-OWNER (if any) DATE