New Jersey Motor Vehicle Commission APPLICATION FOR VEHICLE REGISTRATION (Please complete both sides – print clearly)			PLATE NUMBER PREFIX			VEHICLE IDENTIFICATION NUMBER (VIN)				
NAME/OWNER				NAME/LEASEE - If the vehicle is being leased for a period of one year or more, the owner, must supply the leasee's information,						
GHGHHG										
STREET ADDRESS				STREET ADDRESS						
AADFRERES GHGHHG										
CITY STATE ZIP COUNTY			CITY STATE ZIP				DATE LEASE SIGNED TERM (Months)			
GG KY 65756										
I I	ERCIAL REGISTRATION ONLY STED REGISTRATION CODE:	REQUESTED REGISTRATION WEIGHT OR NUMBER OF PASSENGERS:				E CANCELLATION DATE LEASE CANCEL				
CHECK HERE IF THIS ADDRESS RENEWAL INITAL IS CHANGED FROM PREVIOUS RECORDS	DUPLICATE TRANSFER REI	PLACEMENT P	PLATES	CODE CHANGE			WILL THE VEHICLE BE USED AS A RENTAL? YESNO			
			L DATE OF BIRTH				"SOCIAL SECURITY NUMBER			
2Q42314 FEMALE			/				E (A)			
OWNER'S N.J. DRIVER LICENSE NUMBER/CORPCODE MALE EYE COLOR FUL			L DATE OF BIRTH				"SOCIAL SECURITY NUMBER			
FEMALE .			/				н. н			
LEASEE'S N.J. DRIVER LICENSE NUMBER/CORPCODE MALE EYE COLOR FUL			L DATE OF BIRTH				"SOCIAL SECURITY NUMBER			
FEMALE			1 1				4 4			
OWNER SIGN HERE							RED BY N.J.A.C. 13:21-1. LAWS IN THE COLLECTION			
CO-OWNER SIGN HERE										
(WE) THE APPLICANT(S) CERTIFY THE STATEMENTS ON BOTH SID COMMERCIAL VEHICLE DECLARE KNOWLEDGE OF THE FEDERAL						RATION PRIVIL	EGES APPLICATIONS FO	OR A REG	STRATION FOR A	
BA-49 (R6/15)										