Mew Jersey Motor Vehicle Commission  APPLICATION FOR VEHICLE REGISTRATION (Please complete both sides – print clearly)								PLATE NUMBER PREFIX PLATE HH			VEHICLE IDENTIFICATION NUMBER (VIN) TGHGTYRH		
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,					
OWNER NAME													
STREET ADDRESS								STREET ADDRESS					
CITY STATE ZIP COUNTY							CITY   STATE   ZIP   DATE LEASE SIGNED   TERM (Months)						
NAME/CO-OWNER		CIAL REGISTRATION ONLY TED REGISTRATION CODE:				REQUESTED REGISTRATION WEIGHT OR NUMBER OF PASSENGERS:			SE CANCELLATION	05-04-202			
CHECK HERE IF THIS ADDRESS IS CHANGED FROM PREVIOUS RECORDS	CHANGED FROM PREVIOUS CORDS			CATE TRANSFER REPLACEMENT			LATES	CODE CHANGE			WILL THE VEHICLE BE USED AS A RENTAL? YESNO		
OWNER'S N.J. DRIVER LICENSI	MALE FEMALE		EYÊ COLOR FULL I			DATE OF BIRTH			**SOCIAL SECUI	"SOCIAL SECURITY NUMBER			
345346456456			MALE FEMALE		□ l== a l ····			Date of Birth  5 , 05 , 1998			"SOCIAL SECURITY NUMBER SSN - N - UMBE		
LEASEE'S N.J. DRIVER LICENS	MALE FEMALE				JLL DATE OF BIRTH / / /				"SOCIAL SECURITY NUMBER				
OWNER SIGN HERE							"SUBMISSION OF THE SOCIAL SECURITY NUMBER IS REQUIRED BY N.J.A.C. 13:21-1.3 THE NUMBER WILL BE USED TO PREVENT ERRORS AND ENFORCE FEDERAL AND STATE LAWS IN THE COLLECTION OF MOTOR VEHICLE FEES.						
CO-OWNER SIGN HERE													
(WE) THE APPLICANT(S) CERTI COMMERCIAL VEHICLE DECLA										SISTRATION PRIVI	LEGES APPLICATION	S FOR A REGISTRATION FOR A	
BA-49 (R6/15)													