Motor Vehicle Commission  APPLICATION FOR VEHICLE REGISTRATION (Please complete both sides – print clearly)					JMBER	PREFI	x	VEHICLE IDENTIFICATION NUMBER (VIN) ZAM57YTA4K1328390		
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.					
JP MORGAN CHASE BANK					SANDRA T WEBB-BENINATI					
STREET ADDRESS					STREET ADDRESS					
PO BOX 901098					212 CENTRE ST					
CITY STATE ZIP COUNTY					CITY STATE ZIP DATE LEASE SIGNED TERM (Months)					
FT WORTH TX 76101					CH HAVE	80 UN 1	8008	201  36		
NAME/CO-OWNER  COMMERCIAL REGISTRATION ONLY REQUESTED REGISTRATION CODE:					REQUESTED REGISTRATION WEIGHT LEASE CANC OR NUMBER OF PASSENGERS:				DATE LEASE CANCEL	
CHECK HERE IF THIS ADDRESS IS CHANGED FROM PREVIOUS RECORDS	ITAL DUPLICATE TRANSFER REPLACEMENT			PLATES	CODE CHANGE	INCREASE IN REG.		WILL THE VEHICLE BE USED AS A RENTAL? YES NO		
				LL DATE OF	. DATE OF BIRTH "SOCIAL SECURITY NUMBER					
482583178761010 FEMALE					/	/		- 4		
OWNER'S N.J. DRIVER LICENSE NUMBER/CORPCODE MALE EYE COLOR			YE COLOR FU	ILL DATE OF BIRTH				"SOCIAL SECURITY NUMBER		
		FEMALE			1			н. н		
				LL DATE OF	BIRTH			"SOCIAL SECURITY	Y NUMBER	
W2068 68983 56514	FEMALE	<b>Z</b>  B.	LU C	16	/02	/ 1951		264 -9	4 4248	
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) CERTIFY THE STATEMENTS ON COMMERCIAL VEHICLE DECLARE KNOWLEDGE OF THE							TION PRIVILE	GES APPLICATIONS F	OR A REGISTRATION FOR A	

BA-49 (R6/15)