

Purchase Price \$ 5678.00
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
MAKE	MODEL	6	BURGUND	4DOORSEDA
COMPLETE VEHICLE IDENTIFICATION NUMBER (NOT THE MOTOR NUMBER)				NO. OF AXLES
GHHGYTH1312				4

ODOMETER READING

G G 7 7 7 7 TENTHS

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"
	SHARE CREDIT
	LIENHOLDER CORPCODE
	HGHY^6
STREET ADDRESS OF LIENHOLDER	
NEW ADDRESS, GHHHJ, IN, 23344	

NAME AND ADDRESS OF OWNER AND CO-OWNER BELOW

OWNER	NAME	MUTUAL VOLKSWAGEN		
	N.J. DRIVER LICENSE NO. (IF BUSINESS-CORPCODE)	GGFFGHHHOWDEW		
	DATE OF BIRTH	EYE COLOR	SEX	
	STREET			
	ADDRESS231 ADRESS23			
CO-OWNER	CITY, STATE, ZIP CODE	BHHHHHH GA 13213		
	NAME	FRED LOUIS FLINTSTONE		
	N.J. DRIVER LICENSE NO. (IF BUSINESS-CORPCODE)	23345234234		
	DATE OF BIRTH	EYE COLOR	SEX	
	BLACK			
STREET				
CITY, STATE, ZIP CODE				
34248				

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