New Jersey Motor Vehicle Commission APPLICATION FOR VEHICLE REGISTRATION (Please complete both sides – print clearly)			PLATE NUMBER	PREFIX	VEHICLE IDEN	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,				
LEIN TEST							
STREET ADDRESS	STREET ADDRESS						
ADDRESS1 ADREESS2							
CITY STATE ZIP COUNTY			CITY	STATE ZIP	DATE LEASE SIGNED	TERM (Months)	
CITY AK 66647							
I I	DMMERCIAL REGISTRATION ONLY EQUESTED REGISTRATION CODE:		REQUESTED REGISTRATION WEIGHT OR NUMBER OF PASSENGERS:		EASE CANCELLATION	E CANCELLATION DATE LEASE CANCEL	
CHECK HERE IF THIS ADDRESS US CHANGED FROM PREVIOUS RECORDS	DUPLICATE TRANSFER	REPLACEMENT F	CODE CHANGE	INCREASE IN REG. WEIGH	WILL THE VEHICLE BE US	SED AS A RENTAL?	
OWNER'S N.J. DRIVER LICENSE NUMBER/CORPCODE MALE EYÉ COLOR FUL		L DATE OF BIRTH		"SOCIAL SECURITY N	"SOCIAL SECURITY NUMBER		
CORP44 FEMALE			/	/	-	E 14	
OWNER'S N.J. DRIVER LICENSE NUMBER/CORPCODE MALE EYE COLOR FU		L DATE OF BIRTH		"SOCIAL SECURITY	"SOCIAL SECURITY NUMBER		
FEMALE .			1	1	- 4	н. н	
LEASEE'S N.J. DRIVER LICENSE NUMBER/CORPCODE MALE EYE COLOR FUL			L DATE OF BIRTH		"SOCIAL SECURITY N	"SOCIAL SECURITY NUMBER	
FEMALE			/	/	- 4	-	
OWNER SIGN HERE					EQUIRED BY N.J.A.C. 13:21-1.3 T ATE 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					RIVILEGES APPLICATIONS FOR	R A REGISTRATION FOR A	
BA-49 (R6/15)							