

# Universal Title Application



## Information – Further Instructions on Second Page

Use this form to apply for a New Jersey Title. The applicant (the person signing this application) must be the owner, lienholder, or an authorized representative of the owner/lienholder. Submit this completed application and all supporting documents in person to your local New Jersey Motor Vehicle Commission (MVC) Agency. All applicants or representatives must submit supporting documents, such as **proof of ownership or authorization**, and must provide **proper identification** when submitting this application.

- **Original Documents:** These are required when a release of lien is requested or when a Power of Attorney is used.
- **Originals or Certified Copies:** These are required for court documents, such as divorce decrees and court orders.
- **Photocopies, Faxes, or Scans:** These are acceptable for photo identification (ID)

## Step 1 – Title Transaction Type

☒ Initial NJ Title (New Owner)    ☒ Duplicate Title    ☐ Replacement/Corrected Title    ☐ Vessel Title    ☐ Add Lien    ☐ Remove Lien

## Step 2 – Vehicle Information

Vehicle Identification Number (VIN)  
9876543200

NJ License Plate Number  
67876

Year  
2021

Make  
WEQE

Model  
342WE

Color  
GREY

Weight  
342

Body Type  
3DOOR

No. of Axles  
12

Correction Needed on Vehicle Title (if applicable)

## Vessel Information

Hull Identification Number (HIN)

Year

Make

Fuel Type

Length (in feet)

Hull Material

Propulsion Type

Correction Needed on Vessel Title (if applicable)

Odometer Information

Check Only if One of These Applies

Odometer Reading (at time of purchase): 12

☐ (N) – Not actual mileage

☐ (M) – Mileage has exceeded mechanical limitations

## Step 3 – Vehicle/Vessel Owner Information

Owner Full Name or Entity Name  
EKTATEST

Telephone Number

Driver License or MVC Business Entity Identification Number  
123

Address  
TESTADD1 TESTADD2

City/Town  
TESTCITY

State  
DC

Zip Code  
123456

Co-Owner First Name (if applicable)  
JOY

Co-Owner Last Name (if applicable)  
ELIJAH

Co-Owner Driver License Number (if applicable)  
7654321098

## Step 4 – Lienholder Information (Complete ONLY if Adding or Removing a Lien on Vehicle/Vessel)

Lienholder Name  
LEIN TEST DETAILS

Driver License or MVC Business Entity Identification Number  
CORP CODE

Telephone Number

Lienholder Address  
ADDRESS TEST, ADREESS4, CITY, KS,

City/Town  
CITY

State  
KS

Zip Code  
677677

## Step 5 – Representative Information (Complete ONLY if Representative is NOT the Current Owner or Lienholder)

First Name

Last Name

Telephone Number

Address

City/Town

State

Zip Code

## Step 6 – Duplicate Titles (Check All That Apply and Attach Required Documents/Proof of Ownership or Lienholder)

### For an Individual

- ☐ Valid Photo Identification  
☐ NJ Registration or Insurance Card (Current or Expired)  
☐ Lien Release Letter (if applicable)

### For a Business Entity

- ☐ Valid Photo Identification  
☐ NJ Registration or Insurance Card (Current or Expired)  
☐ Power of Attorney and/or Letter of Authorization from Entity (Both Must Be Notarized and Original)

### For a Lienholder

- ☐ Valid Photo Identification  
☐ Loan Contract or Lease Agreement  
☐ Lien Release Letter (if applicable)  
☐ Power of Attorney and/or Letter of Authorization from Entity (Both Must Be Notarized and Original)

## Step 7 – Recipient Information (For Mail In Applications ONLY – Initial Titles Excluded)

Method of Return – **YOU MUST INCLUDE A PREPAID RETURN AIR BILL WITH YOUR APPLICATION WHEN US MAIL IS NOT SELECTED\***

Mailing Address

City/Town

State

Zip Code

☐ US Mail

☐ Federal Express

☐ UPS

☐ Other

## Step 8 – Certification and Signature(s)

I, the undersigned, hereby certify that the above statements made by me are true. I am aware that if any of the above statements made by me are willfully false, I am subject to civil, criminal, and administrative penalties.

Signature of Representative, Owner, or Lienholder

Signature of Co-Owner (if applicable)

Date

## Motor Vehicle Commission Use Only:

Clerk Initials:

NMVTIS Checked:

Transaction Number:

Check Number and Amount:

Tracking Number: