| Motor Vehicle Commission APPLICATION FOR VEHICLE REGISTRATION (Please complete both sides – print clearly) | | | | PLATE NUMBER PREFIX | | | VEHICLE IDENTIFICATION NUMBER (VIN) 534554353453 | | |
|--|-------------------|-------------|--------------------|--|---|-------------------------|---|--------------------|--|
| 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 NEW | | | | | | | | | |
| STREET ADDRESS | | | | STREET ADDRESS | | | | | |
| ADDRESS 1` ADDRESS 2 | | | | | | | | | |
| CITY STATE ZIP COUNTY | | | CITY | CITY STATE ZIP | | | DATE LEASE SIGNED | TERM (Months) | |
| CITY KY 45654 | | | | | | | | | |
| NAME/CO-OWNER COMMERCIAL REGISTRATION ONLY REQUESTED REGISTRATION CODE: | | | | STED REGISTRATIO | | E CANCELLATION | DATE LEASE CANCEL | | |
| CHECK HERE IF THIS ADDRESS IS CHANGED FROM PREVIOUS RECORDS | DUPLICATE TRANSFE | REPLACEMEN | IT PLATES | CODE CHANGE | | | WILL THE VEHICLE BE USED AS A RENTAL? YESNO | | |
| OWNER'S N J DRIVER LICENSE NUMBER/CORPCODE MALE EYÉ COLOR FUL | | | ULL DATE OF | BIRTH | | "SOCIAL SECURITY NUMBER | | | |
| 34534543 | FEMALE | | | / | | | ie. (e) | | |
| OWNER'S N.J. DRIVER LICENSE NUMBER/CORPCODE | MALE | EYE COLOR F | FULL DATE OF BIRTH | | | | **SOCIAL SECURITY NUMBER | | |
| FEMALE . | | | 1 | | | | H H | | |
| LEASEE'S N.J. DRIVER LICENSE NUMBER/CORPCODE MALE EYE COLOR FUI | | | ULL DATE OF | BIRTH | | "SOCIAL SECURITY NUMBER | | | |
| FEMALE - | | | | / | / | | | | |
| OWNER SIGN HERE | | | | | | | RED BY N.J.A.C. 13:21-1.3 THE LAWS IN THE COLLECTION O | | |
| CO-OWNER SIGN HERE | | | | | | | | | |
| (WE) THE APPLICANT(S) CERTIFY THE STATEMENTS ON BOTH SIDI COMMERCIAL VEHICLE DECLARE KNOWLEDGE OF THE FEDERAL I | | | | | | ATION PRIVIL | EGES APPLICATIONS FOR A | REGISTRATION FOR A | |
| BA-49 (R6/15) | | | | | | | | | |