NO.

MOTOR VEHICLE COMMISSION FEE PAYMENT AUTHORIZATION FORM

NJDL #

Name

Event Code | Posting Date

Authorized By

☐ Restoration Authorization (Check Appropriate Box)
☐ Drivers License ☐ Registration ☐ Commercial
☐ Passenger Endorsement ☐ Boat
☐ School Bus Endorsement

(Event code / effective date)

☐ Rescission Authorization

(Event code / effective date / variable)

☐ MANUAL NOTICE REQUESTED
☐ **DRIVING PRIVILEGE SUSPENDED (Do not drive.)**
☐ **OTHER PRIVILEGE(S) SUSPENDED** _____
☐ CUSTOMER CHOSE TO PAY UNDER PENALTY ASSESSMENT
☐ PRE-HEARING CONF. HELD ☐ OTBH CONF. HELD

VERIFIED ADDRESS ☐ Same (DI Screen) ☐ CHANGED (see comments)

DRIVER LICENSE STATUS
(Check Appropriate Box)

☐ Current DL In Possession
☐ Driver Examination Required
☐ No Fee Duplicate
☐ Renewal/Duplicate
☐ Reciprocity
☐ Reg. Plate No._____
☐ Surrendered DL-Perm

CONDITION
(Check Appropriate Box)

☐ Warning
☐ IDP/DIP/PDP
☐ Reexamination
☐ Other

COMMENT:

NEW ADDRESS: _____

FEES PAID

☐ **DL Rest**	**($100.00)**	**$**_____
☐ **REG Rest**	**($100.00)**	**$**_____
☐ **BAC**	**($100.00)**	**$**_____
☐ **DI**	**($75.00)**	**$**_____
☐ **PDP**	**($75.00)**	**$**_____
☐ **Dishonored Check (circle)**		
DL REG DL/REG		**$**_____
☐ **Dishonored Check Penalty Fee**	**($25.00)**	**$**_____
☐ **Surcharge Dis. Ck. Penalty Fee**	**($25.00)**	**$**_____
☐ **PI**	**($10.00)**	**$**_____
☐ RSC 24(Individual) ☐ RSC 25(Employer)		
☐ **Bus Inspection**		**$**_____
☐ **Temp Reg.**	**($75.00)**	**$**_____
☐ **VS Plate**	**($25.00)**	**$**_____
☐ **VS Plate Replacement Plate**	**($6.00)**	**$**_____
☐ **Other**		**$**_____
	TOTAL	**$**_____

_____
Total Surcharge Due
_____
(As of this date)
_____
Min. Payment Due
_____
(As of this date)

Surcharge amounts above could change on a daily basis if you are in judgment or new bills are added on.

Billing Number	Amount Paid
_____	$_____
_____	$_____
_____	$_____
Total Insurance Surcharge	$_____

TOTAL INSURANCE SURCHARGE/ DRIVER CONTROL FEES	$_____
SECURITY	$_____
UCJ	$_____
TOTAL PAID	$_____
AMOUNT TENDERED	$_____
CHANGE	$_____
CUSTOMER INITIALS	_____

Customer Signature/Date	**Paid by** ☐ **Cash** ☐ **M.O.** ☐ **Check** ☐ **Check #**_____ ☐ **VISA** ☐ **MASTER CARD** ☐ **AMERICAN EXPRESS** **LAST FOUR NUMBERS OF C/C ACCOUNT**_____ **C/C: APPROVAL #**_____ ☐ **REFUND/CANCELLATION: APPROVAL #** _____

Sample For Estimations (Not For Copy)