



# Application for Vehicle Registration



Utilize this form for first-time auto registrations (plates will be provided), or for auto registration renewal



## APPLICATION FOR VEHICLE REGISTRATION

(Please complete both sides - print clearly)

NAME/OWNER		PLATE NUMBER		PREFIX		VEHICLE IDENTIFICATION NUMBER (VIN)					
STREET ADDRESS		NAME/LESSEE - If the vehicle is being leased for a period of one year or more, the owner must supply the lessee's information.									
CITY STATE ZIP COUNTY		CITY STATE ZIP		DATE LEASE SIGNED		TERM (Months)					
NAME/CO-OWNER		COMMERCIAL REGISTRATION ONLY REQUESTED REGISTRATION CODE:		REQUESTED REGISTRATION WEIGHT OR NUMBER OF PASSENGERS:		LEASE CANCELLATION DATE LEASE CANCELED					
CHECK HERE IF THIS ADDRESS IS CHANGED FROM PREVIOUS RECORDS <input type="checkbox"/>		RENEWAL	INITIAL	DUPLICATE	TRANSFER	REPLACEMENT PLATES	CODE CHANGE	INCREASE IN REG. WEIGHT	WILL THE VEHICLE BE USED AS A RENTAL? YES ___ NO ___		
OWNER'S NJ DRIVER LICENSE NUMBER/CORPCODE		GENDER		EYE COLOR		FULL DATE OF BIRTH		*SOCIAL SECURITY NUMBER			
CO-OWNER'S NJ DRIVER LICENSE NUMBER/CORPCODE		GENDER		EYE COLOR		FULL DATE OF BIRTH		*SOCIAL SECURITY NUMBER			
LESSEE'S NJ DRIVER LICENSE NUMBER/CORPCODE		GENDER		EYE COLOR		FULL DATE OF BIRTH		*SOCIAL SECURITY NUMBER			
OWNER/LESSEE SIGN HERE				*SUBMISSION OF THE SOCIAL SECURITY NUMBER IS REQUIRED BY N.J.A.C. 13:21-1.3. THE NUMBER WILL BE USED TO PREVENT ERRORS AND ENFORCE FEDERAL AND STATE LAWS IN THE COLLECTION OF MOTOR VEHICLE FEES.							
CO-OWNER SIGN HERE											

(WE) THE APPLICANT(S) CERTIFIES THE STATEMENTS ON BOTH SIDES OF THIS APPLICATION ARE CORRECT. APPLICANTS FOR A REGISTRATION FOR A COMMERCIAL VEHICLE DECLARE KNOWLEDGE OF AND COMPLIANCE WITH THE FEDERAL MOTOR CARRIER SAFETY REGULATIONS ADOPTED IN N.J.A.C. 13:60, AS APPLICABLE. MISSTATEMENTS MAY RESULT IN SUSPENSION OF REGISTRATION OR DRIVING PRIVILEGES.

BA-49 (R7/19)

IS YOUR REGISTRATION PRIVILEGE NOW REVOKED OR SUSPENDED IN ANY STATE? YES ___ NO ___ IF YES - STATE _____ VIOLATION _____ ODOMETER READING _____ THIS VEHICLE MUST BE COVERED BY LIABILITY INSURANCE IN THE MINIMUM AMOUNT REQUIRED BY LAW WITH A COMPANY AUTHORIZED TO WRITE LIABILITY INSURANCE IN NEW JERSEY. <b>GIVE FULL NAME OF INSURANCE COMPANY AND POLICY NUMBER.</b>		WILL THIS VEHICLE BE USED FOR COMMERCIAL PURPOSES, WHICH IS DEFINED AS A MOTOR VEHICLE OR COMBINATION OF MOTOR VEHICLES USED OR DESIGNED TO TRANSPORT PERSONS OR PROPERTY? YES ___ NO ___
INSURANCE COMPANY:		POLICY NUMBER:
<b>TRADE OR COMPANY NAME CHANGE CANNOT BE MADE AT A MOTOR VEHICLE AGENCY. PLEASE ASK FOR INFORMATION OR CALL 1(609)292-6500.</b>		IF VEHICLE IS REGISTERED UNDER TRADE OR COMPANY NAME, FEDERAL TAX IDENTIFICATION NUMBER: _____ AGRICULTURAL CERTIFICATE NUMBER: _____

ALL PASSENGER VEHICLES, ALL GASOLINE POWERED COMMERCIAL VEHICLES AND ALL DIESEL VEHICLES UP TO AND INCLUDING 8,500 POUNDS ARE SUBJECT TO INSPECTION AT A STATE AUTHORIZED INSPECTION FACILITY OR LICENSED PRIVATE INSPECTION FACILITY. DIESEL VEHICLES WITH A GROSS VEHICLE WEIGHT OF 18,000 OR MORE POUNDS ARE SUBJECT TO ANNUAL SMOKE OPACITY INSPECTION AT A LICENSED DIESEL EMISSION PRIVATE INSPECTION FACILITY.

DIESEL POWERED VEHICLES WITH A GVWR FROM 8,501 UP TO AND INCLUDING 17,999 POUNDS, EXCLUDING DIESEL BUSES AS DEFINED IN N.J.S.A. 39:8-60 AND PASSENGER VEHICLE TRANSPORTATION AS DEFINED IN N.J.A.C. 13:20-7.1, ARE SUBJECT TO SELF-INSPECTION REGULATIONS. IF SUBJECT TO SELF-INSPECTION, THE SIGNER(S) CERTIFIES THAT THIS VEHICLE HAS BEEN INSPECTED AND MAINTAINED AS REQUIRED BY LAW. COMMERCIAL MOTOR VEHICLES, AS DEFINED IN N.J.A.C. 13:60 AND 49 CFR PART 390.5, ARE SUBJECT TO AN ANNUAL INSPECTION PER 49 CFR 396.17. IF USED FOR SOLID WASTE DISPOSAL OR SOLID WASTE COLLECTION, THE SIGNER(S) CERTIFIES THAT THE VEHICLE HAS THE APPLICABLE APPROVALS FROM THE DEPARTMENT OF ENVIRONMENTAL PROTECTION.

FOR MVC USE ONLY