

**APPLICATION FOR DUPLICATE
CERTIFICATE OF OWNERSHIP**

STATE OF NEW JERSEY
MOTOR VEHICLE COMMISSION
SPECIAL SERVICES
P.O. BOX 017
TRENTON, NEW JERSEY 08666-0017

ABOVE SPACE IS FOR OFFICE USE ONLY

INSTRUCTIONS – PLEASE READ CAREFULLY

- o 1. This form is to be completed by the **titled owner(s)** Please type or print clearly.
- o 2. **A \$60.00 check or money order (Do Not Send Cash) and a copy of the current or expired registration certificate or insurance identification card must accompany this application.** Mail this information to the Trenton Central Office or bring in person to any motor vehicle agency or regional service center with Proof of Identity.

1. NAME OF TITLED OWNER(S) _____

OWNER(S) NEW JERSEY DRIVER LICENSE NUMBER _____
(IF BUSINESS – CORPCODE)

DATE OF BIRTH _____ EYE COLOR _____ SEX _____

ADDRESS _____
NO. AND STREET CITY STATE ZIP CODE

DESCRIPTION OF VEHICLE

2. LICENSE PLATE NO. _____ MAKE _____ YEAR _____ BODY TYPE _____ MODEL _____

WEIGHT CLASS _____ COMPLETE VEHICLE IDENTIFICATION NUMBER _____

3. Are there any encumbrances or liens against the vehicle at the present time? YES _____ NO _____

If "YES", give name and address of lienholder: _____
NAME

_____ NO. AND STREET CITY STATE ZIP CODE

NOTE: If the original certificate was issued subject to lien, and lienholder has not submitted evidence of satisfaction, a duplicate certificate of ownership will not be issued until proof of payment is received from the lienholder.

R.S. 39:10-12..."A person who falsely states, in any application to the **Chief Administrator** for a duplicate certificate of ownership, that a certificate of ownership, or title papers, are lost, shall be subject to a fine of not less than two hundred dollars (\$200.00) nor more than five hundred dollars (\$500.00) or imprisonment for a term not exceeding thirty days or both."

This application is submitted to the **Chief Administrator of the Motor Vehicle Commission** because the whereabouts of the title paper for the motor vehicle described herein-owned by the undersigned **IS UNKNOWN** and certification is hereby made that it **IS LOST**.

It is further certified that the _____
YEAR MAKE VEHICLE IDENTIFICATION NUMBER

was physically examined by me and the identification number is as entered hereon. I certify that I have compared this number with the numbers shown on the evidence of ownership and on my application for a duplicate New Jersey Certificate of Ownership and they agree. I further certify that I have read and understand this application and that all statements are correct.

_____ DATE SIGNATURE OF APPLICANT(S)

(IF PARTNERSHIP, SO INDICATE, IF CORPORATION, GIVE TITLE OF OFFICER)

**IF NOT FILLED IN ENTIRELY AND ACCOMPANIED BY CHECK OR MONEY ORDER
(IF MAILED, DO NOT SEND CASH) THIS APPLICATION WILL BE REJECTED.**