



# Motor Vehicle Commission

## STATE OF NEW JERSEY

Business Licensing Services Bureau

PO Box 168

(609) 292-6500 ext.5014

I, \_\_\_\_\_, owner of \_\_\_\_\_  
(Subcontractor)

located at \_\_\_\_\_ hereby certify that I have

entered into an agreement with \_\_\_\_\_ located  
(Autobody Licensee)

at \_\_\_\_\_ to perform the below

listed service:

- ☐ Four-Wheel Alignment
- ☐ Air Conditioner Servicing
- ☐ Mechanical Repairs
- ☐ Structural Repairs (Frame Machine)
- ☐ All of the above services are preformed in house

I understand that this document will be attached to his/her New Jersey Full Service Auto Body Repair Facility License.

\_\_\_\_\_  
Signature Subcontractor

\_\_\_\_\_  
Signature Licensee

\_\_\_\_\_  
Date