

# NEW CAR DEALER INSPECTION STICKER ORDER FORM

LICENSE #: \_\_\_\_\_ DATE: \_\_\_\_\_

**MAIL TO:**

NEW JERSEY MOTOR  
VEHICLE COMMISSION  
PO BOX 680  
TRENTON, NJ 08666-680

BUSINESS NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

\_\_\_\_\_

AUTHORIZED SIGNATURE: \_\_\_\_\_

LOTS OF 25

**QUANTITY**

**CAR# 99 @DEALER STICKERS** \_\_\_\_\_

**YEAR INSERTS** \_\_\_\_\_

**MONTH INSERTS** \_\_\_\_\_

**FOR MVC USE ONLY**

ISSUING STATION: ~~AT APO~~ EMPLOYEE INITIALS: \_\_\_\_\_

REGION: \_\_\_\_\_