MAKE			PLEASE DESCRIBE THE VEHICLE ACCURATELY						
	OF VE	HICLE (PRINT) MO	DEL	YEAR	COLOR	BODY TYPE			
COMPLETE VEHICLE IDENTIFICATION NUMBER (NOT THE MOTOR NUMBER)			)	NO. OF AXLES					
00	METE	R READING							
LEASE CHECK				TENTHS					
	SECH "OR "		cle now have a lien? (Is yo	our vehicle fin	anced?) Yes	No			
	check	ed "yes" <b>PRINT</b> name and a	address of bank or finance	e company be	elow. If you checked "No",	print 'NONE" in the box be			
Ä.	NAME	OF BANK OR FINANCE COMPA	NY (LIENHOLDER), IF NO LIE	N PRINT "NONE	"				
ENHOLDER	LIENH	HOLDER CORPCODE							
	STRE	ET ADDRESS OF LIENHOLDER							
_	E AND	ADDRESS OF OWNER	R AND CO-OWNER BI	ELOW					
	NAME								
	N.J. D	RIVER LICENSE NO. (IF BUSINESS	-CORPCODE)						
ĒR	DATE	OF BIRTH			EYE COLOR	SEX			
CO-OWNER OWNER	STRE	ET							
	CITY,	STATE, ZIP CODE							
	NAME								
	N.J. DI	RIVER LICENSE NO. (IF BUSINESS	-CORPCODE)						
	DATE	OF BIRTH			EYE COLOR	SEX			
	STRE	ET							
	CITY, S	STATE, ZIP CODE							
		NTOF APPLICANT(S): The							
		wn on this form has been co ticular.	ompared to the identificati	on numbero	n the motor vehicle and fur	ther certifies that they ag			
SIG	iN			SIGN					
ΗE	RE ;	x		HERE	<u>X</u>				
		OWNER	DATE		CO-OWNER (if any)	DATE			
	NI.			SIGN					
SIG	) E	x		HERE	X				

OS/SS-7 (R2/09)