

For MVC  
Use Only:

Clerk Id:

Reason for Reject:

Date:



# New Jersey Motor Vehicle Commission

Special Plate Unit  
P.O. Box 015  
Trenton, New Jersey 08666-0015  
609-292-6500 ext. 5061

## APPLICATION FOR TRANSFERING OF AN EXISTING LICENSE PLATE

**The purpose of this application is to transfer an active license plate to another vehicle.**

Please staple a photocopy of your *CURRENT* registration and photograph of your license plate to this application. If your registration will expire within 60 days, please renew it before submitting this application.

Indicate license plate number below, exactly from left to right. Include spaces, for example:

T	H	A	N	K	S	1
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N	/	I	/	C	E	/
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Enter Your Plate Number Here

The plates you have ordered are custom-made; therefore please allow 3 to 6 weeks for processing and delivery time.

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Phone Number (H) \_\_\_\_\_ (C) \_\_\_\_\_ (Email Address) \_\_\_\_\_

*\*Your phone number will only be used to contact you in case of a discrepancy with your application.*