# State of New Jersey Department of Banking & Insurance



# Annual Report Worksheet for Motor Vehicle Installment Sellers

# Year Ending December 31, 2024

New Jersey Department of Banking & Insurance Division of Banking Attn: Sharon Davis -- 8<sup>th</sup> floor 20 West State Street Trenton, NJ 08625-0040

#### For Use as a Worksheet Only – Do Not Send to the Department!

## Licensee Demographics

The online application will populate the associated fields with the data currently found in our Licensing System. *All information requested below will be <u>required</u> by the online application (unless indicated otherwise.)* 

NJ License Reference Number:		(This is the 7-digit identification number found on your licensing certificate, followed by one of the following type codes: C01, P01, or 101.)	
License	ee Name:		
Busine	ss Address:		
	_		
	_		
Telepł	none Number:		
FAX	Number:		
Busine	ess E-mail:		
		<b>nust</b> include their official business e-mail address in their 1. Failure to supply your official business e-mail address t filing.	
Note:	December 31, 20	o were actively licensed in New Jersey for any period of the 24 are <u>required</u> to file an annual report. You are required 24. Audited financial statements are <u>not</u> required to com	to file an annual report even if you did
		ely licensed on December 31, 2024, your annual report m s of the end of 2024.	ust reflect the total activity of your New
		ed your license during 2024, your annual report must reflected date of surrender.	ct the total activity of your New Jersey
		port should only reflect the amount of business done w all New Jersey branch offices during 2024.	ith <i>New Jersey consumers</i> thru your
	If you actively he license.	eld two or more New Jersey licenses during 2024, you mu	st file an annual report for <u>each</u> type of

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## Motor Vehicle Installment Sellers Section

### Motor Vehicle Installment Seller Activity Summary

Please provide the total number and dollar amounts of your net retail installment contracts for the period from January 1, 2024 through December 31, 2024 in the categories described below. To determine the appropriate <u>category</u>, use the *cash price*.

Example 1: The cash price is \$9000, but there were \$1500 in financed warranties, bringing the total amount financed to \$10,500. The total amount financed in connection with this sale is to be stated as the "Total Dollar Amount" in the "Cash Price of \$10,000 or less" category.

*Example 2:* The cash price was \$15,000, but the total amount financed was only \$9000 because of a cash down payment. The total amount financed in connection with this sale is to be stated as the "Total Dollar Amount" in the "Cash Price of \$10,001 to \$50,000" category.

You are to report business with New Jersey consumers only, including the consolidated activity of all of your NJ branch offices.

You must also include any of the following that apply to your business activities:

- All financing contracts greater than three (3) months.
- All financing provided through your dealership, offered directly by you or offered by one or more banks or financing companies, provided the customer obtained financing through your dealership. This includes *all* leases with a purchase option.
- All revolving credit contracts longer than three (3) months.

When calculating the cash price and the amount financed to be reported for each contract, you must exclude the following:

- All cash payments and trade-in values
- Sales tax
- Motor Vehicle Commission fees
- Tire tax

When entering these figures into the online application, round all entries to the nearest whole dollar. <u>Do not</u> enter commas or periods.

Description	Total Number	Total Dollar Amount Financed (in whole US dollars)	Average Value (in whole US dollars)
Retail Installment Contracts with a <i>cash price of \$10,000 or less</i>			
Retail Installment Contracts with a <i>cash price of \$10,001 to \$50,000</i>			
Retail Installment Contracts with a <i>cash price of more than \$50,000</i>			

# **NOTE:** The Average Value is arrived at by dividing the Total Dollar Amount by the Total Number. This figure will be calculated for you automatically in the online application.

**<u>Do not</u>** include contracts with less than three (3) installments.

## For Use as a Worksheet Only -- Do Not Send to the **Department!** Affidavit

This sample affidavit is included for completeness only. The online application will collect all of the necessary information. DO NOT MAIL THIS AFFIDAVIT to the Department, unless you are specifically instructed to do so.

I hereby certify that the information provided in connection with this Annual Report is true to the best of my knowledge and belief:

(Date)

(Signature of Licensee or Responsible Party)

Please enter the following information for the individual preparing this report:

Name of Preparer	
Title of Preparer	
Phone of Preparer	
E-mail of Preparer <i>(if available)</i>	

Please enter the following information for the licensee or individual responsible for the licensed entity. If that person no longer holds an active license, please put the mailing address of their current location or the location where they would like their mail sent so future mailings may be successfully sent to them.

Name of Responsible Party			
Title of Responsible Party			
Address of Responsible Party			
Phone of Responsible Party			
E-mail of Responsible Party			
Every licensee <b>must</b> include their official Failure to supply your official e-mail addr			
	===== Notarization =====		
State of	County of		
Sworn to and subscribed before me this	day of	in the year	,
and I hereby certify that I am not an officer or	director of this entity.		

(Signature	of Notary	Public)
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My commission expires on

(Date)