



NEW CAR INSPECTION STICKERS AUTHORIZATION FORM

The undersigned hereby authorizes the persons whose signatures appear below to be responsible for the ordering, security and distribution of the new car inspection stickers received from the New Jersey Motor Vehicle Commission. Pursuant to N.J.A.C. 13:20-28.1 et seq., a motor vehicle leasing or rental company that violates any provision of this subchapter shall be subject, upon notice and an opportunity to be heard, to the suspension or revocation of its privilege of performing inspections of new motor vehicles.

SIGNATORY # 1	NAME (PRINT IN FULL)	TITLE
	ADDRESS	CITY, STATE /ZIP
	HOME NUMBER	
	SIGNATURE	

SIGNATORY # 2	NAME (PRINT IN FULL)	TITLE
	ADDRESS	CITY, STATE /ZIP
	HOME NUMBER	
	SIGNATURE	

SIGNATORY # 3	NAME (PRINT IN FULL)	TITLE
	ADDRESS	CITY, STATE /ZIP
	HOME NUMBER	
	SIGNATURE	

Inspection stickers may be ordered by mail or fax. All orders must be on the MVC-issued order form and signed by an authorized signatory listed on this Form. The letter must state the number of stickers being ordered. The NJMVC will mail the stickers via USPS Certified Mail/Return Receipt Requested. An authorized signatory must sign the Return Receipt confirming receipt of the stickers.

By Mail:

New Jersey Motor Vehicle Commission
Business Licensing Services Bureau
IDS Program
P.O. Box 172
Trenton, NJ 08666-0172

By Fax:

New Jersey Motor Vehicle Commission
Business Licensing Services Bureau
IDS Program
Fax # (609) 292-5153 or (609) 292-4400

Please complete the section below and include a current color passport-size photograph for each person listed as an authorized signatory on the Authorization Form. An Authorization Form must be completed for all persons authorized to act on behalf of the company. If you authorize any other person not listed on this Form or revoke the authority of any person listed herein, you must notify the Business Licensing Services Bureau immediately and submit an updated Authorization Form. All Authorization Forms submitted prior to the most current are invalid.

I certify that all of the information included herein is true to the best of my knowledge and belief. I am aware that, if any of this information is willfully false, I am subject to punishment. I also certify that I am aware that:

- a. All new car inspection stickers are to be reviewed for accuracy upon receipt.
- b. Inspection stickers are to be secured in a locked location at all times.
- c. Stickers are to be affixed only to vehicles owned and inspected by the undersigned.
- d. A ledger shall be maintained and shall specify the description of the vehicle to which the new car inspection sticker has been affixed.

Business Name (Print in full): _____ Registration #: _____

Applicant Name (Print): _____ Date: _____

Applicant Signature: _____ Title: _____

Owner / Partner / Officer / Member