



# New Jersey Voter Registration Application

Print clearly in Ink using a ball point pen or marker

**1** Check boxes that apply

I am a U.S. citizen  Yes  No\*

I will be 18 years of age by the next election  Yes  No\*

**STOP** \*If you check iNoi in either box DO NOT COMPLETE THIS FORM

**2** Check boxes that apply

New Registration (if you are registering for the first time in the county in which you live)

Address Change (if you are currently registered and have moved within your county)

Name Change (if you are currently registered in the county in which you live)

**3** Last Name First Name Middle Initial Suffix

**4** Street Address (where you live) Apartment No.

Municipality County Zip Code

**5** Complete only if different from address above

Address (where you get your mail) Apartment No.

Municipality County Zip Code

**6** Date of Birth Month Day Year

**7** Telephone Number (optional) Area Code

**8** Name and address used for your last voter registration, if applicable

Last Name First Name Middle Initial Suffix

Address Apartment No.

Municipality County State Zip Code

**9** Give one ID No. Only the last four numbers of your Social Security No. OR NJ Driver's Lic. No.

**FOR OFFICE USE ONLY**

Clerk

Registration No.

Office Time Stamp

by mail  in person

**10** Declaration

I swear or affirm that:

- I am a U.S. Citizen.
- I will be at least 18 years old on or before the next election.
- I live at the above address.
- I am not on parole, probation or serving a sentence due to a conviction for an indictable offense under any federal or state laws.
- I understand that any false or fraudulent registration may subject me to a fine up to \$1,000, imprisonment up to 5 years or both pursuant to R.S. 19:34-1.

Signature / Mark

Date

If applicant is unable to complete this form, print name and address of individual who completed this form

Name Address Municipality State Zip Code

## Important Instructions for Sections 4, 6, 9, and 10

**4** This form will be rejected if this section (4) is not completed. Give your home address, not a business address.

**6** Birth date is required.

**9**

- If you are registering by mail for the first time in your county and never voted in a federal election in your county, the ID no. that you gave above must be verified. You will be contacted by the county commissioner of registration if your numbers cannot be verified. If you do not have a NJ driver's license or a Social Security no. you must include a copy of a current and valid ID document such as: a valid photo ID, current utility bill, bank statement, government check, pay check, or any other government document that shows your name and address.
- If you are a first-time registrant by mail and you do not provide ID, or if your ID numbers can not be verified, before voting for the first time, you must provide ID at the polling place or submit ID if voting by absentee ballot. If you do not provide ID at the polling place, you must vote by provisional ballot. You will have until the close of business on the second day after the election to provide ID to the county commissioner of registration. Your provisional ballot will be rejected if you do not provide ID. ID numbers are confidential and will not be released by any government agency. Any person who uses identification illegally shall be subjected to criminal penalties.

**10** This form will be rejected if this section (10) is not completed. Requires signature or mark of applicant.



### Democracy Starts Here!

New Jersey Voter Registration Application

Use this form to Register to Vote or to Change Your Name and/or Address

www.NJElections.org or call toll-free 1-877-NJVOTER (1-877-658-6837)