



Division of  
Elections  
www.NJElections.org

# Superintendents/Commissioners of Elections

## Atlantic County

Superintendent of Elections  
1333 Atlantic Avenue  
Suite 400  
Atlantic City, NJ 08401  
• 609-343-2245  
• Fax: 609-343-2240

## Bergen County

Superintendent of Elections  
One Bergen County Plaza  
Room 380  
Hackensack, NJ 07601  
• 201-336-6100  
• Fax: 201-336-6111

## Burlington County

Superintendent of Elections  
PO Box 6000  
Mount Holly, NJ 08060  
• 609-265-5111  
• Fax: 609-265-5990

## Camden County

Superintendent of Elections  
PO Box 1066  
Camden, NJ 08101  
• 856-225-5269  
• Fax: 856-225-5134

## Cape May County

Commissioner of Registration  
P.O. Box 5000  
Cape May Court House, NJ 08210  
• 609-465-1050  
• Fax: 609-465-1639

## Cumberland County

Commissioner of Registration  
60 Broad St. W., Suite 216  
Bridgeton, NJ 08302  
• 856-453-4850  
• Fax: 856-451-3172

## Essex County

Superintendent of Elections  
33 Washington Street  
Newark, NJ 07102  
• 973-621-5061  
• Fax: 201-621-6464

## Gloucester County

Commissioner of Registration  
PO Box 352  
Woodbury, NJ 08096  
• 856-384-4500  
• Fax: 856-251-1647

## Hudson County

Superintendent of Elections  
595 Newark Avenue  
3rd Floor, Room 301  
Jersey City, NJ 07306  
• 201-795-6555  
• Fax: 201-795-6561

## Hunterdon County

Commissioner of Registration  
P.O. Box 2900  
Flemington, NJ 08822-9952  
• 908-788-1190  
• FAX: 908-806-4686

## Mercer County

Superintendent of Elections  
PO Box 8068  
Trenton, NJ 08650  
• 609-989-6770  
• Fax: 609-989-6888

## Middlesex County

Commissioner of Registration  
777 Jersey Avenue  
New Brunswick, NJ 08901-3605  
• 732-745-3471  
• Fax: 732-214-1656

## Monmouth County

Superintendent of Elections  
300 Halls Mill Road  
Freehold, NJ 07728  
• 732-431-7785  
• Fax: 732-431-7870

## Morris County

Superintendent of Elections  
PO Box 900  
Morristown, NJ 07963-0900  
• 973-285-6715  
• Fax: 973-285-5208

## Ocean County

Commissioner of Registration  
PO Box 2006  
Toms River, NJ 08754-2006  
• 732-929-2167  
• Fax: 732-506-5110

## Passaic County

Superintendent of Elections  
311 Pennsylvania Avenue, Room 103  
Paterson, NJ 07503  
• 973-881-4515  
• Fax: 973-881-1634

## Salem County

Commissioner of Registration  
94 Market Street  
Salem, NJ 08079-9856  
• 856-935-7510 ext. 8330  
• Fax: 856-935-6725

## Somerset County

Commissioner of Registration  
P.O. Box 3000  
Somerville, NJ 08876-1262  
• 908-231-7084  
• Fax: 908-231-9465

## Sussex County

Commissioner of Registration  
18 Church Street  
Newton, NJ 07860-9965  
• 973-579-0950  
• Fax: 973-579-0955

## Union County

Commissioner of Registration  
271 North Broad Street  
Elizabeth, NJ 07208  
• 908-527-4121  
• Fax: 908-527-4127

## Warren County

Commissioner of Registration  
Court House  
413 Second Street  
Belvidere, NJ 07823  
• 908-475-6313  
• Fax: 908-475-6221

**Mail the Voter  
Registration form to  
Superintendents/  
Commissioners of  
Registration office  
in the county  
where you reside.**



# New Jersey Voter Registration Application

Please print clearly in ink. All information is required unless marked optional.

<b>1</b> Check boxes that apply: <input type="checkbox"/> New Registration <input type="checkbox"/> Name Change <input type="checkbox"/> Address Change <input type="checkbox"/> Signature Update <input type="checkbox"/> Political Party Affiliation or Non-affiliation Change						<b>FOR OFFICIAL USE ONLY</b>		
<b>2</b> Are you a U.S. Citizen? <input type="checkbox"/> Yes <input type="checkbox"/> No (If No, DO NOT complete this form)			Will you be 18 years of age by the next election? <input type="checkbox"/> Yes <input type="checkbox"/> No (If No, DO NOT complete this form)				Clerk	
<b>3</b> Last Name		First Name	Middle Name or Initial	Suffix (ex. Jr., Sr., III)			Registration #	
<b>4</b> Date of Birth      Month <input type="text"/> <input type="text"/> Day <input type="text"/> <input type="text"/> Year <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>							Office Time Stamp	
<b>5</b> NJ Driver's License Number or MVC Non-driver ID Number				If you DO NOT have a NJ Driver's License or MVC Non-Driver ID, provide the last 4 digits of your Social Security Number.			<input type="checkbox"/> by mail <input type="checkbox"/> in person	
<input type="checkbox"/> "I swear or affirm that I DO NOT have a NJ Driver's License, MVC Non-driver ID or a Social Security Number."								
<b>6</b> Home Address (DO NOT use PO Box)		Apt.	Municipality	County	State			Zip Code
<b>7</b> Mailing Address if different from above		Apt.	Municipality	County	State			Zip Code
<b>8</b> Last Address Registered to Vote (DO NOT use PO Box)		Apt.	Municipality	County	State		Zip Code	
<b>9</b> Former Name if Making Name Change				Day Phone Number (Optional)				
<b>10</b> Do you wish to declare a political party affiliation? (Optional)								
<input type="checkbox"/> Yes, the party name is _____ <input type="checkbox"/> No, I do not wish to be affiliated with any political party.								
<b>11</b> Gender	<input type="checkbox"/> Female <input type="checkbox"/> Male	<b>Declaration</b> - I swear or affirm that:	<input checked="" type="radio"/> I am a U.S. Citizen <input checked="" type="radio"/> I live at the above address <input checked="" type="radio"/> I will be at least 18 years old on or before the next election	<input checked="" type="radio"/> I will have resided in the State and county at least 30 days before the next election <input checked="" type="radio"/> I am not on parole, probation or serving a sentence due to a conviction for an indictable offense under any federal or state laws	<input checked="" type="radio"/> I understand that any false or fraudulent registration may subject me to a fine of up to \$15,000, imprisonment up to 5 years, or both pursuant to R.S. 19:34-1			
Signature: Sign or mark and date on lines below  <b>X</b> _____ Date _____				If applicant is unable to complete this form, print the name and address of individual who completed this form.  Name _____ Date _____ Address _____				

## Important Instructions for sections 5, 6 and 10

- 5) Registrants who are submitting this form by mail and are registering to vote for the first time: If you do not have any of the information required by section 5, or the information you provide cannot be verified, you will be asked to provide a COPY of a current and valid photo id, or a document with your name and current address on it to avoid having to provide identification at the polling place.
- Note:** ID Numbers are Confidential and will not be released by any governmental agency. Any person who uses such numbers illegally shall be subject to criminal penalties.
- 6) If you are homeless, you may complete section 6 by providing a contact point or the location where you spend most of your time.
- 10) You may declare a political affiliation or you may declare to be unaffiliated, regardless of any prior party affiliation. Completing section 10 is OPTIONAL and will not affect the acceptance of your voter registration application.

### Need More Information? Check boxes below if you would like to receive more information about:

- |   |   |   |
|---|---|---|
| <input type="checkbox"/> absentee voting        | <input type="checkbox"/> polling place accessibility                                  | <input type="checkbox"/> available election materials in this alternative language: _____ |
| <input type="checkbox"/> becoming a poll worker | <input type="checkbox"/> voting if you have a disability, including visual impairment |   |

For further information visit [www.NJElections.org](http://www.NJElections.org) or call toll-free **1-877-NJVOTER** (1-877-658-6837)