

Information - Further instructions on second page						
Use this form to apply for a medical exemption for vehicle sunscreening from NJ Motor Vehicle Commission.						
Step 1 – What type Sunscreening are you applying for?						
O Initial application for sunscreening medical exemption O Renewal of sunscreening medical exemption						
Step 2 – Enter Vehicle Information						
Vehicle Identification Number (VIN)						
NJ License Plate Number			Year			
Make			Model			
Step 3 – Vehicle Owner Information			I			
First Name or Entity Name	Last Na	me		MVC Entity ID Number or DL Number		
Address (Street)			City / Town	1	State	Zip Code
Phone Number	E-mail	Address		Co-Owner DL Number (If applicable)		
Step 4 – To be completed by physician	<u> </u>					
Full Name I		Medical Lice	Medical License No.		State	Date of Licensure
Business Address (Street or P.O. Box)			City / Town		State	Zip Code
O1. Polymorphous light eruptionO5. Solar urticariaO9. Skin cancers vO2. Persistent light reactivityO6. Lupus erythematosusDiagnosis of cO3. Actinic rectuloidO7. Chronic actinic dermatitisActinic dermaO4. Porphyrins8. Photosensitive eczemaActinic derma						gnosis of chronic
Must also submit a valid prescription.						
Recommended treatment:						
I certify, under penalty of law, that the above facts are true and correct to the best of my knowledge.						
Physician's Signature	Date					
For medical conditions involving dermate been performed to test skin for radiation What is the specific wavelength or action photosensitive? nm	waveler	ngths that elic	it a photo reac	tion.		
Motor Vehicle Commission Use Only		Т. ·	1 - • • •		Т	
Processed by: Universal # Issued:		Approved, Reason fo	-	ejected:		

Instructions:

Step 1 – Type of Transaction

Initial Sunscreening- for first time applicants. If approved, medical exemption will be good for 48 months.

Renewal Sunscreening- previously approved applicants need to reapply for medical exemption every 48 months.

Step 2 – Vehicle Information

Information provided must match your NJ registration information. If approved, your sunscreening exemption will be tied to the vehicle information provided in step 2.

Step 3 – Owner Information

Information provided must match your NJ registration information.

Step 4 – Physician information

Your physician must fill out and sign section 4 in in order for your initial or renewal sunscreening application to be reviewed. You must provide a valid prescription from the same physician to the NJMVC.

Please see N.J.A.C. 13:20-1.5 (a) through (d).

Step 5 – E-mail or Mail-in Application

Once application is completed in its entirety, mail your application along with your valid prescription to: Customer Advocacy Office

Attn: Sunscreening Exemption

P. O. Box 403

Trenton, NJ 08666-0403

or e-mail to:

SUNSCREENING@mvc.nj.gov

After your application is processed, you will receive a letter correspondence via mail or e-mail from Customer Advocacy.

Submitting your application and prescription does not give you permission to get sunscreening applied to your windows. If your application is approved, you will receive a letter with a temporary approval, which will allow you to have window sunscreening installed. If you have any questions, the Customer Advocacy Office can be reached at (609) 984-2973.

Next Steps:

For initial applicants:

- 1. Receive authorization to install sunscreening (tinting) and Sunscreening Installation Confirmation from NJMVC.
- 2. Install window sunscreening.
- 3. E-mail or mail window Sunscreening Installation Confirmation to the address listed in Step 5.
- 4. Receive permanent window sunscreening authorization document to keep in approved vehicle at all times.
- 5. Renew every 48 months.

For renewing applicants:

- 1. Receive permanent window sunscreening authorization document to keep in approved vehicle at all times.
- 2. Renew every 48 months.

If rejected:

1. You may resubmit your application and valid prescription to the e-mail address or P.O. Box listed in Step 5.

Reasons for Rejection:

- A. The medical condition listed does not qualify for vehicle sunscreening per NJ regulation N.J.A.C. 13:20-1.5.
- B. Applicant and vehicle information must be completed in its entirety on application.
- C. All physician information must be completed in its entirety, signed and legible in Step 4.
- D. Dermatological photo testing information must be provided.
- E. Missing a valid prescription from your physician requesting sunscreening.
- F. Other:___