Application for Sunscreening

MUST BE INSTALLED BY AN APPROVED INSTALLER

Use this form to apply for a medical exemption for vehicle sunscreening from NJ Motor Vehicle Commission.

Step 1 – What type of Sunscreening are you applying for?

○ Initial application for sunscreening medical exemption ○ Renewal of sunscreening medical exemption ○ Duplicate card

Step 2 – Enter Vehicle Information

Vehicle Identification Number (VIN):		NJ License Plate Number:
Year:	Make:	Model:

Step 3 – Vehicle Owner Information – Address must match the address on the vehicle registration

(visit www.njmvc.gov to change your address)

First Name or Entity Name:	Last Name:	MVC Entity ID Number or DL Number:	
Street Address:	City/Town:	State:	Zip Code:
Phone Number:	Email Address:	Co-Owner DL Number (if applicable):	

Step 4 – To be completed by Physician

Full Name:	Medical License Number:	State:	Date of Licensure:
Business Address (Street or P.O. Box):	City/Town:	State:	Zip Code:
Patient Name (First and Last):	Patient Driver License Number:		

☐ 1. Polymorphous light eruption
☐ 2. Persistent light reactivity
☐ 3. Actinic reticuloid
☐ 4. Porphyrins
☐ 5. Solar urticaria
☐ 6. Lupus erythematosus
☐ 7. Chronic actinic dermatitis
☐ 8. Photosensitive eczema
☐ 9. Skin cancers with diagnosis of chronic actinic dermatitis
☐ 10. Other photosensitive disorders or conditions (must specify):

_____

_____

Must also submit a valid prescription

What is the specific wavelength or action spectra of light (UVA, UVB, near UV, visible) to which patient is photosensitive?

_____

For medical conditions involving dermatological photo sensitivity, signature below certifies that photo testing has been performed to test skin for radiation wavelengths that elicit a photo reaction.

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:

Motor Vehicle Commission Use Only

Processed By:	Approved/Rejected:
Universal Number Issued:	Reason for Rejection (See key on back):

DRIVING NJ FORWARD

Visit us at www.NJMVC.gov

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Sunscreening Application 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 on page 1.

Step 3 – Owner Information

Information provided must match your NJ registration information – visit www.njmvc.gov to change your address.

Step 4 – Physician Information

Your physician must fill out and sign section 4 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 – Email or Mail-in Application

Once the 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 email to:

Sunscreening@mvc.nj.gov

After your application is processed, you will receive letter correspondence via mail or email 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 by an **APPROVED INSTALLER ONLY.** 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 with an approved installer (list can be found at www.njmvc.gov).
3. Email 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 email 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: _____.