

[Your Name]
[Your Address]
[City, State, ZIP Code]
[Email Address]
[Phone Number]
[Date]

New Jersey Division of Motor Vehicles

[Address of the Local DMV Office]
[City, State, ZIP Code]

Subject: License Renewal Request

Dear [DMV Official/Department Name],

I am writing to request the renewal of my New Jersey driver's license.
Below are my details for your reference:

- Full Name: [Your Full Name]
- License Number: [Your License Number]
- Date of Birth: [Your Date of Birth]
- Address: [Your Current Address]

I would like to confirm that I am eligible for renewal and have included any required documents with this request. Please inform me if any additional information or action is needed on my part.

Thank you for your attention to this matter. I look forward to your prompt response.

Sincerely,

[Your Signature (if sending a hard copy)]
[Your Printed Name]