

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

New Jersey Motor Vehicle Commission

[Office or Department Name]
[Office Address]
[City, State, Zip Code]

Subject: Request for Renewal of New Jersey Driver's License

Dear [Recipient's Name or "To Whom It May Concern"],

I am writing to request the renewal of my New Jersey driver's license. My current license, with number [Your License Number], is set to expire on [Expiration Date].

I have attached the necessary documents, including:

1. A completed driver's license renewal application form
2. Payment for the renewal fee
3. Proof of identity and residency

Please let me know if there are any additional requirements or if further action is needed on my part.

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

Sincerely,

[Your Name]

[Your Signature (if sending a hard copy)]