

NJ ZIP Annual Compliance Questionnaire

Product number (listed on approval letter)	
Business/Organization name	
Respondent name	
Date	

There are eight questions listed below. They should be answered in relation to *only and all* your vehicles that received NJ ZIP voucher funding.

1. Please list all vehicles VINs and current odometer readings

VIN	Odometer reading	VIN	Odometer reading

- | | | | |
|--|-----|----|-----|
| 2. In the last year, have you maintained vehicle registration in NJ? | Yes | No | |
| 3. In the last year, have you maintained 75% or more of vehicle miles traveled within NJ? | Yes | No | |
| 4. In the last year, have you maintained 50% or more of vehicle miles traveled within eligible communities? | Yes | No | N/A |
| 5. In the last year, has your vehicle been domiciled in an eligible community? | Yes | No | N/A |
| 6. In the last year, have you required any unscheduled maintenance/warranty claims on your vehicle(s)?
If yes, please fill out the form on the next page. | Yes | No | |
| 7. Do you need a new bumper sticker? If yes, please provide mailing address on next page. | Yes | No | |
| 8. Do you have any issues or comments on vehicle(s), vendor, or NJ ZIP? If yes, use form on next page. | Yes | No | |

Unscheduled maintenance log

VIN	Date	Issue	Maintenance services performed	Who performed maintenance?	Cost	Covered by warranty?

Comments/issues to report

Current mailing address if requesting a bumper sticker to replace one that was lost/damaged