



**BICYCLE REGISTRATION FORM
DEPARTMENT OF PUBLIC SAFETY**

Name: _____
(Last) (First) (MI)

Address: _____

City: _____ State: _____ SID# _____

Phone#: _____ Cell _____

Bicycle Description:

Make: _____ Model: _____

Serial #: _____ Color: _____

Year of Purchase _____ Value: \$ _____

Other Identifying Features: _____

It is recommended that you register your bicycle with the Department of Public Safety. The information will be kept on file, in case your bicycle is lost or stolen.

It is required that you register each year to keep the information current.

Do not block building entrances or sidewalks when locking your bicycle. It is required that you use the supplied bicycle rack when parking your bicycle. It is recommended that you use a quality lock to secure your bicycle and do not give out the combination or loan out the key.

Attach photo if available.

Dept use: Year Registered _____ Photo attached ___ yes ___ no