Lacey Police Department
Bicycle Registration Form

FOR OFFICIAL USE ONLY

License #: _____

Issue Date:_____

Issued By: _____

Bicycle Make: _____ **Bicycle Model:** _____

Serial Number:_____

Check one for each of the following categories:

Type:	☐Single Bar	☐Double Bar	☐Girls	☐Boys
Tires:	☐High Pressure	☐Middle Weight	☐Balloon	☐Semi Pneumatic
Brakes:	☐Bandix	☐Perry	☐Higgins	☐Hand
	☐Komet	☐New Departure	☐Other: _____	
Rims:	☐Metal (Painted)	☐Chrome		
Wheel Size:	☐16”	☐20”	☐24”	☐26”
Fenders:	☐Front	☐Rear		
Colors:	1._____	2._____	3._____	

Registered Owner Information

Name:_____
Last *First* *Middle*

Date of Birth: _____

Address: _____

Home Phone:_____ **Other Phone:**_____

Change of Address / New Owner Information

New Owner:_____
Last *First* *Middle*

Date of Birth: _____

Address: _____

Home Phone:_____ **Other Phone:**_____

Signature of previous owner, *selling* bicycle: _____

Change of address: _____