

# ALTON POLICE DEPARTMENT

## BICYCLE REGISTRATION

Last Name	First Name	MI	DOB
Street Adress	City	Phone	
Make	Model	New	Used
Manufacturer's Serial No.			

<p style="text-align: center;"><b>Frame</b></p> <p><input type="checkbox"/> Boy's <input type="checkbox"/> Girl's</p> <p>=====</p> <p><input type="checkbox"/> Heaveyweight <input type="checkbox"/> Mediumweight <input type="checkbox"/> Lightweight</p> <p>=====</p> <p><input type="checkbox"/> Double Bar <input type="checkbox"/> Single Bar <input type="checkbox"/></p>	<p style="text-align: center;"><b>Brakes</b></p> <p><input type="checkbox"/> Hand <input type="checkbox"/> Front <input type="checkbox"/> Rear <input type="checkbox"/> Coaster</p> <hr/> <p style="text-align: center;"><b>Wheels</b></p> <p><input type="checkbox"/> 16 <input type="checkbox"/> 24 <input type="checkbox"/> 27 <input type="checkbox"/> 20 <input type="checkbox"/> 26 <input type="checkbox"/> 28 <input type="checkbox"/></p>	<p style="text-align: center;"><b>Hub</b></p> <p><input type="checkbox"/> Coaster <input type="checkbox"/> 3 Speed <input type="checkbox"/> 5 Speed <input type="checkbox"/> 10 Speed <input type="checkbox"/> 15 Speed <input type="checkbox"/></p> <hr/> <p style="text-align: center;"><b>Seat</b></p> <p>Make _____</p>
<p style="text-align: center;"><b>Colors</b></p> <p>Frame _____</p> <p>Fenders _____ <input type="checkbox"/> Front <input type="checkbox"/> Rear</p> <p>Rims _____</p> <p>Trim _____</p>	<p style="text-align: center;"><b>Accessories</b></p> <p><input type="checkbox"/> Locking Device <input type="checkbox"/> Legal Reflectors</p> <hr/> <p style="text-align: center;"><b>Remarks</b></p> <hr/> <p style="text-align: center;">License Number _____</p> <p style="text-align: center;">Date Issued _____</p>	