## Ferndale Police Department

# Bicycle REGISTRATION FORM

2220 Main Street - Ferndale, WA 98248

PH: 360-384-3390 FX: 360-384-3345

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| **(Please Print)** | | | | | | | | | | | | | | | | | | | | | | | | Today’s Date: | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Owner INFORMATIOn | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Last Name: (Required) | | | | | | | | | First: (Required) | | | | | | | | | | | | | | | Middle: | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Home address: | | | | | | | | | | | | | | | | Mailing Address if different from Home: | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | |  | | | | | | | | | | | | |
| City: | | | | | | | State: | | | | | | | ZIP Code: | | | | | | | Phone: | | | | | | | |
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| Email: | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| Bicycle INFORMATION | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| (Please fill out all sections for registration) | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Bicycle Make: (ex. TREK) | | | Model: (ex. 4400) | | | | | | | | | Series # (or N/A) | | | | | | | | | | Serial Number (Located bottom of frame) | | | | | | |
|  | | |  | | | | | | | | |  | | | | | | | | | |  | | | | | | |
| Primary Color of bicycle: | | | | Secondary Color(s) of bicycle: | | | | | | | | | | | | | Value of Bicycle: | | | | | Frame Type: (Child, Men’s, or Women’s) | | | | | | |
|  | | | |  | | | | | | | | | | | | |  | | | | |  | | | | | | |
| Does this bicycle have a lock? | | | | | | ❑ Yes | | | | ❑ No | | |  | | | | | | | | | | | | | | | |
| Please indicate any Identifying Markers With an **X**: | | | | | Bell | | | | | | Light | | | | | | | Foot straps | | | | | | | Bottle Holder | | Basket | |
| Hook  Handlebars | | Skinny Tires | | | | | | Horn | | | | | | | Carrier | | | | How many Speeds | | | | | | | Reflector(s) | | |
| Other identifying information: | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| The above information is true to the best of my knowledge. I certify that the bicycle I am registering belongs to me and was obtained legally. I authorize Ferndale Police Department to release my registration information in the event of theft or loss to other Police Departments and/ or related entities. I understand this registration is not a guarantee that my bicycle will be protected from theft or loss.  I understand registration of this bicycle cannot be transferred to a different owner or bicycle and a new registration form must be completed. | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  |  | | | | | | | | | | | | | | | | | | |  | | |  | | | | |  |
|  | Owners Signature | | | | | | | | | | | | | | | | | | |  | | | Date | | | | |  |
| **Email to:** [**contact@ferndalepd.org**](mailto:contact@ferndalepd.org) **to start registration process with Ferndale Police Department.** | | | | | | | | | | | | | | | | | | | | | | | | | | | | |