



## Bicycle Registration

JMC 10.13



1. Please complete the information below and provide to the Police Department at 150 E Pearl.
2. There is no fee to register your bicycle with the Jackson Police Department.
3. Bicycle must be brought to the Police Department for inspection to complete registration.

### APPLICANT

*Please print legibly*

Owner Name: \_\_\_\_\_  
LAST FIRST MIDDLE INITIAL

Mailing Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Physical Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Driver License: State \_\_\_\_\_ # \_\_\_\_\_

### BICYCLE

☐

E-BIKE

☐

PEDAL

Make: \_\_\_\_\_ Color: \_\_\_\_\_

Model: \_\_\_\_\_ Class: ☐1 ☐2 ☐3 Top MPH Assisted Speed: ☐20 ☐28 Other: \_\_\_\_\_

Serial/VIN #: \_\_\_\_\_ Speedometer Works: ☐Yes ☐No

Describe any extra details about the bike to be used for identifying details: \_\_\_\_\_  
Electric Motor Watts: \_\_\_\_\_

I do hereby affirm the information supplied above in this application is true  
and correct to the best of my knowledge.

\_\_\_\_\_  
Date Owner Signature Notary signature

To be completed by Jackson Police Department:

License Number: \_\_\_\_\_ JPD Inspection/Issue: BY: \_\_\_\_\_ BADGE# \_\_\_\_\_ DATE: \_\_\_\_\_