



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 #: _____ Speedometer Works: Yes No

VIN #: _____ Electric Motor Watts: _____

Describe any extra details about the bike, anything specific, or identifying details: _____

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



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