



# Romeoville Police Department

10 Montrose Drive  
Romeoville, IL 60446  
Phone: 815-886-7219 Fax: 815-886-2763



## Bicycle Registration

Print this form and mail or fax a completed copy to the Romeoville Police Department at the above address. Keep a copy for your records. The information you submit will be used to assist in returning your registered bicycle in the event it is stolen and recovered or found by the Romeoville Police Department.

| Person Registering Bicycle               |                  |                    |
|------------------------------------------|------------------|--------------------|
| Last Name _____                          | First Name _____ | Middle Init. _____ |
| Address _____                            |                  |                    |
| City _____                               | State _____      | Zip Code _____     |
| Phone Number ( _____ ) _____             |                  |                    |
| Owner Name if Different Than Above _____ |                  |                    |

| Bicycle #1                                                             | Bicycle #2                                                             |
|------------------------------------------------------------------------|------------------------------------------------------------------------|
| Brand _____                                                            | Brand _____                                                            |
| Model _____                                                            | Model _____                                                            |
| Serial # _____                                                         | Serial # _____                                                         |
| Color(s) _____                                                         | Color(s) _____                                                         |
| Size _____                                                             | Size _____                                                             |
| Boys Bike <input type="checkbox"/> Girls Bike <input type="checkbox"/> | Boys Bike <input type="checkbox"/> Girls Bike <input type="checkbox"/> |
| Speed _____                                                            | Speed _____                                                            |
| Owner Applied Number (i.e., driver's license #, etc)<br>_____          | Owner Applied Number (i.e., driver's license #, etc)<br>_____          |
| Other Comments _____<br>_____<br>_____                                 | Other Comments _____<br>_____<br>_____                                 |

| The above information is accurate to the best of my knowledge |             |
|---------------------------------------------------------------|-------------|
| Signature: _____                                              | Date: _____ |

| Police Department Use Only |                   |
|----------------------------|-------------------|
| Date Received: _____       | Entered By: _____ |