

ROBERT D. LANDON CHIEF OF POLICE

1545 POOLE BLVD. • P.O. BOX 3447 • YUBA CITY, CALIFORNIA 95992 • (530) 822-4660 • FAX (530) 822-4799

BICYCLE REGISTRATION

| Date: | | | |
|---|---|--|------|
| Name of Parent/Adult | Owner: | | |
| Name of Child: | | | |
| Address: | | | |
| City: | | State: | Zip: |
| Home Phone: | Work Phone: | Cell Phone: | |
| Model: Colors(s): Speeds: Serial No: | Size: Gender: | 3. Rear Stays (L or R) 4. Tube next to crank 5. Top Crank Area | 9 |
| Other Characteristics (i | i.e. Stickers, Special Equipment, etc.) | | |
| | | | |

Mail completed form to:

Yuba City Police Department 1545 Poole Blvd. Yuba City, Ca. 95993

Attn. Bicycle Registration

Or turn into the front counter of the police department - Monday through Friday (except holidays) 8am -5pm.

If you have more than one bike to register, use multiple forms but just fill in the bicycle portion of the form then submit them all together.